

P05000122983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

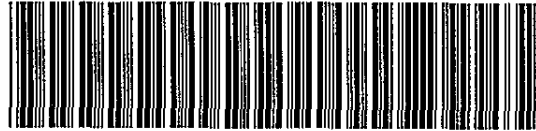
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400059072624

09/07/05--01006--011 \*\*87.50

FILED  
05 SEP -6 PM 2:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C-29-4

**TRANSMITTAL LETTER**

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** H.S.B. & Associates, Inc.

**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Robert Hansen

Name (Printed or typed)

720 N.E. 30th Avenue Apt Q

Address

Ocala, Fl 34470

City, State & Zip

(352) 207-6058

Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

H.S.B. & Associates, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

720 N.E. 30th Avenue Apt Q  
Ocala, FL 34470

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful business

**ARTICLE IV SHARES**

The number of shares of stock is:

Will issue ninety (90) shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

*Robert Hansen*  
Robert Hansen  
720 NE 30th Avenue Apt Q  
Ocala, FL 34470  
President

Caleb Schmidt  
*4325 SE 59th St.*  
Ocala, FL 34480  
Secretary

Abrahamn Blocker  
*P.O. Box 2766*  
*Ocala, FL 34478*  
Vice President

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

*Robert Hansen*  
Robert Hansen  
720 NE 30th Avenue Apt Q  
Ocala, FL 34470

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*Robert Hansen*  
Robert Hansen  
720 NE 30th Avenue Apt Q  
Ocala, FL 34470

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

*Robert Hansen*  
\_\_\_\_\_  
Signature/Registered Agent

*8/31/05*  
\_\_\_\_\_  
Date

*Robert Hansen*  
\_\_\_\_\_  
Signature/Incorporator

*8/31/05*  
\_\_\_\_\_  
Date

FILED  
05 SEP -6 PM 2:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA