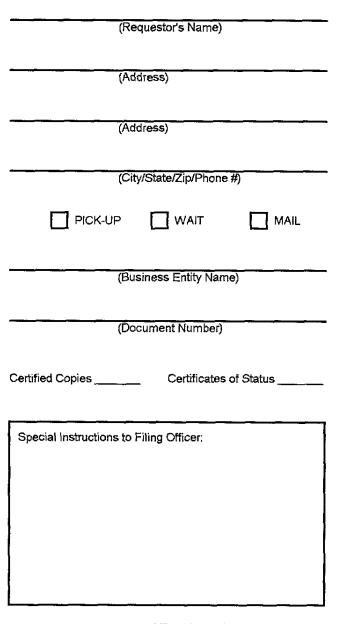
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Office Use Only



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2005 OCT - 7 AM 9: 22

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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 2005 OCT -7 AM 9: 22
TALLAHASSEE FLORIDA

Same Same Same Same

| Talianassee, FL 323 | 114 | | |
|----------------------|--|--|--|
| SUBJECT: God Se | nd Helping Hands Inc. (PROPOSED CORPORA) | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| | | | |
| Enclosed are an orig | inal and one (1) copy of the artic | cles of incorporation and | a check for: |
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED |
| WD 0.1 | Mary Helen Pincki | 201 | |
| FROM: | Name (Printed or typed) | | |
| - | • | | |
| | 6014 Sudbury Ave. | | |
| | Address | | |
| | Jacksonville Florida 32210 | | |
| | City, State & Zip | | |
| | (904) 463-2497 or (904) 720-1850 | | |
| • | 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)

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

God send Helping Hands Inc.

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TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6014 Sudbury Ave. Jacksonville, Florida. 32210

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To identify and engage families who may not have life insurance coverage and to assist families by advocating services. We will find the cheapest insurance coverage, rather whole life, term life or a pre-need packet with a local funeral home. To assist families with the maintenance of their policy and last will and testament. We will also help guide the families to a local church.

ARTICLE IV SHARES

The number of shares of stock is:

1 (one)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Mary H. Pinckney, 6014 Sudbury Ave., Jacksonville, Florida 32210, President.

Javardo A.Jones, 1268 Gano Ave, Orange Park, Florida 32073, Officer.

Kisha Gaffney, 2651 University Blvd N. Apt#G207, Jacksonville, Florida 32211, Treasurer.

Latoya Pinckney, 500 Acme Street #1212 Jacksonville, Florida 32211, Secretary

Arlene Presley, 5942 Copper Lake Drive, Jacksonville, Florida 32218, Officer.

Tramaine Pinckney, 1127 W.27th St., Jacksonville, Florida 32209, Officer.

ARTICLE VI REGISTERED AGENT

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

Mary H.Pinckney

6014 Sudbury Ave.

Jacksonville, Florida 32210

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mary H. Pinckney

6014 Sudbury Ave.

Jacksonville Florida 32210

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

Signature/Incorporator

September 8, 2005

Signature/Incorporator

September 8, 2005

Date

Signature/Incorporator