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2006 MAR 17 PM 3:48
CLERK OF STATE
TALLAHASSEE FLORIDA

3/20/06

COVER LETTER

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2006 MAR 17 PM 3:48

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

DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

SUBJECT: Open Hands Caregiving Services, 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: Cheryl Lawrence

Name (Printed or typed)

3719 Tam Drive

Address

Orlando, Florida 32808

City, State & Zip

407-276-4958 or 407-967-5434

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:

Open Hands Caregiving Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3719 Tam Drive, Orlando fl. 32808

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide community care and guidance to people with special needs.

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Cheryl S. Lawrence
3719 Tam Drive
Orlando, Fl 32808

ARTICLE VI REGISTERED AGENT

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

Cheryl S. Lawrence
3719 Tam Drive
Orlando, Fl 32808

ARTICLE VII INCORPORATOR

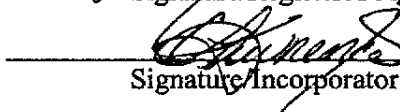
The **name and address** of the Incorporator is:

Cheryl S. Lawrence
3719 Tam Drive
Orlando, Fl. 328080

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/Registered Agent



Signature/Incorporator

FILED

2006 MAR 17 PM 3:48

CLERK OF STATE
TALLAHASSEE FLORIDA

3/14/2006

Date

3/14/2006

Date