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## **COVER LETTER**

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

SUBJECT: HEL HOME ENTERPRISES CO.				
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
☐ <b>\$</b> 70.00	\$78.75	\$78.75	87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
		ADDITIONAL CO	Status PV REQUIRED	
ADDITIONAL COPY REQUIRED				
FROM:	LINFORD C. BRO	) WN		
Name (Printed or typed)				
215 S.W. ASPEN GLEN				
Address				
		_		
	LAKE CITY FL.	32024 State & Zip		
City, State & Zip				
386-756-0856 Cell-386-984-7227				
Daytime Telephone number				

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

Signature/Registered Agent

Configured Common