

PA 7800009569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

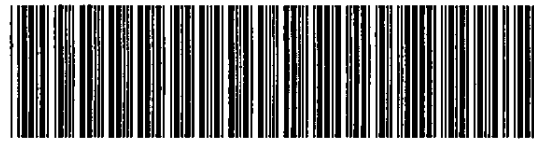
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 JAN 22 P 3:54

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COVER LETTER

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

SUBJECT: Hope Support Coordination 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: Yves Robert Pierre

Name (Printed or typed)

2536 NW 79th Ave

Address

Margate, FL 33063

City, State & Zip

(954) 471-7264

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:

Hope Support Coordination Services, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2536 NW 79th Ave
Margate, FL 33063

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide support services for individuals with disabilities.

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Yves Robert Pierre, President
Marva A Pierre, Vice President
2536 NW 79th Ave
Margate, FL 33063

ARTICLE VI REGISTERED AGENT

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

Yves Robert Pierre
2536 NW 79th Ave
Margate, FL 33063

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Yves Robert Pierre
2536 NW 79th Ave
Margate, FL 33063

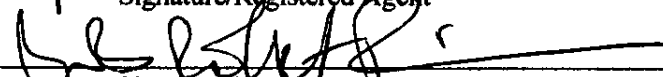
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



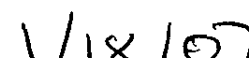
Signature/Registered Agent



Date



Signature/Incorporator



Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA