

PO700066320

(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



000103815560

06/05/07--01034--012 **78.75

RECEIVED
07 JUN -5 AM 11:21
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
FILED
07 JUN -5 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6/6/07

**LAZARUS
CORPORATE FILING SERVICE**

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. HELPING HANDS HOME HEALTH CORP

(Corporation Name)

(Document #)

2. _____

(Corporation Name)

(Document #)

3. _____

(Corporation Name)

(Document #)

4. _____

(Corporation Name)

(Document #)

☒ Walk in

☒ Pick up time

2-06

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
07 JUN -5 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be: *Helping Hands Home Health Corp*

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:
2301 N.W. 7th Street, Suite C, Miami, FL 33125

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: *100*

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Carlos Castillo
824 E MOWRY Dr #1208
HOMESTEAD, FL 33030

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Carlos Castillo
824 E Mowry Dr #1208
Homestead, FL 33030

The undersigned incorporator has executed these Articles of Incorporation this 04 day of June, 2007

Carlos P

Signature

FILED
07 JUN -5 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI- DIRECTOR(S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

Carlos Castillo (President)
824 E Mowry Dr #1208
Homestead, FL 33030

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Carlos P

Registered Agent Signature