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## **COVER LETTER**

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

SUBJECT:	And	els at Hand Gr	oup Home Inc.	
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	
FROM:	Niombi Howard  Name (Printed or typed)			
2311 NW 191 ST Address				
Miami Gardens, FL 33056 City, State & Zip				
954-496-5530				
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:  Angels at Hand Group Home Inc.	FILED 2000 APR 29 P 12: 34
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  2311 NW 191 ST  Miami Gardens FL 33056	SECRETARY OF STATE TALLAHASSEE. FLORIDA
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  To care and give the disable a loving home.	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Niombi Howard, President 2311 NW 191 ST N " " Treasurer " Utonia Lloyd, Secretary "	
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the Niombi Howard  2311 NW 191 ST  Miami Gardens FL 33056	ne registered agent is:
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Niombi Howard  2311 NW 191 ST  Miami Gardens (L. 33056)  ***********************************	******
Having been named as registered agent to accept service of process for the above sto certificate, I am familiar with and accept the appointment as registered agent and agent agent and agent	
Signature/Registered Agent  Signature/Incorporator	4/25/08 Date 4/25/08 Date