

PO8000085910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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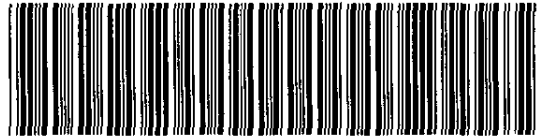
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
ALABAMA SECRETARY OF STATE

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COVER LETTER

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

SUBJECT: Hands-On Interpreting, Inc., a Florida Profit Corporation

(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: Melissa A. Martin

Name (Printed or typed)

8942 W. Flagler Street, #2

Address

Miami, FL 33174

City, State & Zip

305-710-5333

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:

Hands-On Interpreting, Inc., a Florida Profit Corporation

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

8942 W. Flagler Street, #2
Miami, FL 33174

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation is organized for the purpose of transacting any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

This corporation is authorized to issue 100 (One Hundred) shares of \$1.00 par value common stock.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Melissa A. Martin- D,P,VP,S
8942 W. Flagler Street, #2
Miami, FL 33174

ARTICLE VI REGISTERED AGENT

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

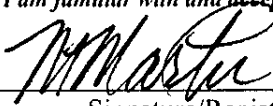
Melissa A. Martin
8942 W. Flagler Street, #2
Miami, FL 33174

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Melissa A. Martin
8942 W. Flagler Street, #2
Miami, FL 33174

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

7.1.08

Date

7.1.08

Date

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TALLAHASSEE, FLORIDA