

PRO900035372

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

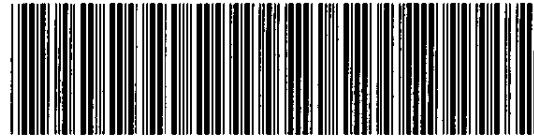
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(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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ANDREW  
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09 APR 20 PM 4:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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04/21

## COVER LETTER

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

**SUBJECT:** HEMALIMO, 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       \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

\$78.75       \$87.50  
Filing Fee      Filing Fee,  
                    & Certified Copy      Certified Copy  
                    & Certificate of      & Certificate of  
                    Status      Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Michael Rampersaud

Name (Printed or typed)

4932 Heartland Street

Address

Orlando, FL 32829

City, State & Zip

407-967-1990

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:

HEMALIMO, Inc

### ARTICLE II PRINCIPAL OFFICE

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

4932 Heartland Street, Orlando FL 32829

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For Profit

### ARTICLE IV SHARES

The number of shares of stock is:

100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Rampersaud, M  
4932 Heartland Street  
Orlando, FL 32829  
(President)

### ARTICLE VI REGISTERED AGENT

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

Michael Rampersaud  
4932 Heartland Street  
Orlando, FL 32829

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Rampersaud  
4932 Heartland Street  
Orlando, FL 32829

\*\*\*\*\*  
*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*

Michael Rampersaud  
Signature/Registered Agent

4/16/09  
Date

Michael Rampersaud  
Signature/Incorporator

4/16/09  
Date

APPROVED  
AND  
FILED

09 APR 20 PM 4:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA