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| (Requestor's Name)                      |  |  |  |  |
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| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| (Only old to Ziph Hollow)               |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
|   |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
|   |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
|   |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
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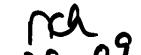




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# **COVER LETTER**

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

| SUBJECT:                | e-Hand Technology Corp.  |                                       |   |
|-------------------------|--|---------------------------------------|---|
| Enclosed are an orig    | inal and one (1) copy of the arti  | TE NAME - MUST INCL                   | ·   |
| □ \$70.00<br>Filing Fee | ☑ \$78.75 Filing Fee & Certificate of Status   | □ \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate o Status |
| FROM:                   | Name   | H Williams Jr<br>(Printed or typed)   |   |
|                         | 7749 Normandy Blvd, #145-324  Address  Jacksonville, Florida 32221                             |                                       |   |
|                         | City, State & Zip  |                                       |   |
|                         | 904-608-5587  Daytime Telephone number   |                                       |   |
|                         | ehandtechsupport@gmail.com  E-mail address: (to be used for future annual report notification) |                                       |   |

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:

e-Hand Technology Corp.

#### ARTICLE II PRINCIPAL OFFICE

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

7749 Normandy Blvd. #145-324, Jacksonville, FL 32221

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Our business strategy will revolve around the need to provide quality products and services to our various target customers. This shall be undertaken through the establishment of a professional team and the provision of quality, custom-designed services, catering to the client's particular needs.

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): Jacquelyn A. Gwinnup-Williams - Owner Marvin H Williams Jr - President & CEO

#### ARTICLE VI REGISTERED AGENT

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

Marvin H Williams Jr 8366 Holly Hill Cove Jacksonville, FL 32221-1514

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jacquelyn A Gwinnip-Williams 8366 Holly Hill Cove

Jacksonville, FL 32221-1514

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\_

October 12, 2009

Date

October 12, 2009

Date