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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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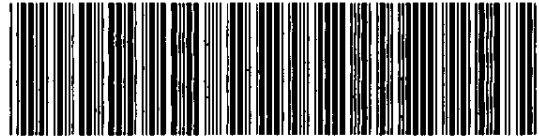
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/21/09--01027--007 **70.00

APPROVED
AND
FILED

09 DEC 30 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VIN

COVER LETTER

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

SUBJECT: HALS HOME HANDYMAN SERVICES 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
 Status

ADDITIONAL COPY REQUIRED

FROM: HAL CANADY
Name (Printed or typed)

12359 PULASKI ROAD
Address

JACKSONVILLE, FL 32218
City, State & Zip

(904)334-5785
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 23, 2009

HAL CANADY
12359 PULASKI RD
JACKSONVILLE, FL 32218

SUBJECT: HAL'S HOME REPAIRS, INC.
Ref. Number: W09000055561

We have received your document for HAL'S HOME REPAIRS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

An effective date may be added to the Articles of Incorporation **if a 2010 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 109A00039079

Articles of Incorporation

The undersigned incorporator for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be:

09 DEC 30 AM 8:44

HALS HOME HANDYMAN SERVICES INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPLE OFFICE

The principle place of business & mailing address of this corporation shall be:

12359 PULASKI RD, JACKSONVILLE FL 32218

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HANDYMAN

ARTICLE IV SHARES

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

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List names, address, & specific titles:

HAL CANADY PRESIDENT 12359 PULASKI RD JACKSONVILLE FL 32218

ARTICLE VI REGISTERED AGENT

The name & Florida street address of the initial registered agent is:

HAL CANADY 12359 PULASKI RD JACKSONVILLE FL 32218

ARTICLE VII INCORPORATOR

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

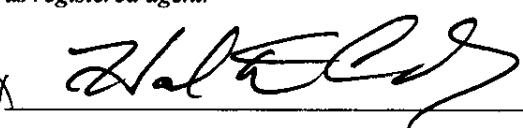
HAL CANADY 12359 PULASKI RD JACKSONVILLE FL 32218

X _____
Signature/Incorporator

12/28/09
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

X _____
Signature/Registered Agent

12/28/09
Date