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10 JUN - 2 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10-3-10 8

COVER LETTER

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

SUBJECT: Helping Hand Therapy, 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
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: Joy C. Broersma

Name (Printed or typed)

3620 SE 48th Street

Address

Ocala, FL 34480

City, State & Zip

352-291-7565

Daytime Telephone number

brads_joy@hotmail.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 CORPORATE NAME

The name of this corporation shall be:
Helping Hand Therapy, Inc.

ARTICLE II PRINCIPAL OFFICE

The principle street and mailing address of the corporation's principal office is:
3620 SE 48th Street
Ocala, FL 34480

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to provide Occupational therapy services and engage in any lawful activity permitted by the laws of this state.

ARTICLE IV SHARES

The total number of shares which the corporation shall have authority to issue is 100 shares of no par value common stock.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

The names and addresses of the persons constituting the officers

President
Joy C. Broersma
3620 SE 48th Street
Ocala, FL 34480

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the corporation's registered agent is:

Joy C. Broersma
3620 SE 48th Street
Ocala, FL 34480

ARTICLE VII INCORPORATOR

The name and street address of the incorporator is

Joy C. Broersma, Incorporator
3620 SE 48th Street
Ocala, FL 34480

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TALLAHASSEE, FLORIDA

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Having been named as registered agent to accept service of process for the above named 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.

Joy C. Broersma
Signature/Registered Agent

6/1/2010
Date

Joy C. Broersma
Signature/Incorporator

6/1/2010
Date