

P11000094845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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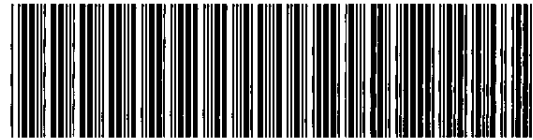
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/31/11--01023--002 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 OCT 31 AM 11:36

APPROVED
AND
FILED

1/H

COVER LETTER

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

SUBJECT: Two More Hands, 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: Lea McKenney
Name (Printed or typed)
701 S. Howard Ave, Ste 106-101
Address
Tampa, FL 33606
City, State & Zip
813-410-1607
Daytime Telephone number
piscesnn@yahoo.com
E-mail address: (to be used for future annual report notification)

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

APPROVAL
AND
FILED

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:

Two More Hands, Inc.

11 OCT 31 AM 11:36

ARTICLE II PRINCIPAL OFFICE

Principal street address

SECRETARY OF STATE
MAILING ADDRESS: FLORIDA

701 S Howard Ave, Ste 106-101
Tampa, FL 33606

same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in and transact any lawful business for which corporations may be incorporated under the laws of the State of Florida. No other purpose limits this general purpose in any way.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lea McKenney, President

Address: 701 S Howard Ave

Ste 106-101

Tampa, FL 33606

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

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

Name: Lea McKenney

Address: 701 S Howard Ave, Ste 106-101

Tampa, FL 33606

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lea McKenney

Address: 701 S Howard Ave, Ste 106-101

Tampa, FL 33606

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

Lea McKenney
Required Signature/Registered Agent

Oct. 23, 2011
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Lea McKenney
Required Signature/Incorporator

Oct. 23, 2011
Date