

P12000060798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

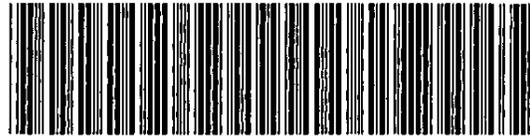
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUL 10 PM 1:34

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COVER LETTER

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

SUBJECT: Harvey Hays 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: Harvey Hays
Name (Printed or typed)
4117 Native Garden Dr.
Address
Plant City, FL 33565
City, State & Zip
813 754-1922
Daytime Telephone number
N/A
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)

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ARTICLE I NAME

The name of the corporation shall be: Harvey Hayes, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
4117 Nature Garden Dr.
Plant City, FL
33565

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Handyman Business for Profit

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Harvey Hayes, President Name and Title: _____
Address: 4117 Nature Garden Dr. Address: _____
Plant City, FL
33565

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Harvey Hayes
Address: 4117 Nature Garden Dr.
Plant City FL 33565

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Harvey Hayes
Address: 4117 Nature Garden Dr.
Plant City FL 33565

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

James H. Hampel Required Signature/Registered Agent 7/03/12 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.

James H. Hampel Required Signature/Incorporator 7/03/12 Date