Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000030540 3)))



H130000305403ABCQ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : SUPERBIZ.COM, INC.

Account Number: I20070000160 Phone: (800)494-3124

Fax Number : (561) 455-9885

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

			•	
Email	Address	 		

FLORIDA PROFIT/NON PROFIT CORPORATION GRACEFUL HANDS, INC.

Certificate of Status	0	
Certified Copy	0	
Page Count	03	
Estimated Charge	\$70.00	

13 FEB -7 PH 1-33

Electronic Filing Menu

Corporate Filing Menu

Help



15612422818

p.2

H130000305403

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:

GRACEFUL HANDS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4680 LIPSCOMB STREET, STE 8 PALM BAY, FLORIDA 32905

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers is/are:

DIRECTOR, PRESIDENT

CHRISTA KELLEY

4680 LIPSCOMB STREET, STE 8

PALM BAY, FLORIDA 32905

H13000030540 3

Feb 07 13 05:06p

H130000305403

PAGE 2 GRACEFUL HANDS, INC.

ARTICLE VI REGISTERED AGENT

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

CHRISTA KELLEY
4680 LIPSCOMB STREET, STE 8
PALM BAY, FLORIDA 32905

ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:

CHRISTA KELLEY
4680 LIPSCOMB STREET, STE 8
PALM BAY, FLORIDA 32905

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.

CHRISTA KELLEY / Registered Agent

CHRISTA KELLEY /Incorporator /

2 -7 20/3

H130000305403