# P13000037779

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
•				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
W3-16997				

Office Use Only



700245818307

03/21/13--01011--005 \*\*78.75

HILED 13 APR 25 PH IN 45 SECNELARY OF STATE

Town MPR 2 6 2013

## **COVER LETTER**

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

SUBJECT:	4H HOLDINGS		THE CHARGE					
	(PROPUSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)					
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:					
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	Certified Copy & Certificate of Status					
	ADDITIONAL COPY REQUIRED							
FROM:		e (Printed or typed)	<del></del>					
	375 KALCON	AYENVE	·					
Address								
	MIMI SPRIN	165, FL 3	33/66					
City, State & Zip								
(305) 441- 2383  Daytime Telephone number								
Daytime Telephone number								
HHERNANDEZ@ HH CONSTRUCTIONGROWP. NE								
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

March 22, 2013

HUGO HERNANDEZ 375 FALCON AVE MIAMI SPRINGS, FL 33166

SUBJECT: HH HOLDINGS INC Ref. Number: W13000016997

We have received your document for HH HOLDINGS INC and your check(s) totaling \$78.75. 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 existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

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) 245-6052.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 213A00006877

13 APR 25 PH 1: 13

 $\Pi$ 

www.sunbiz.org

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TICLE II P	RINCIPAL OFF			Matting of		
75 02	Principal street	_		Mailing address, if different is:		
	con Av					
MIAMI	SRINGS,	FL 331	<u>6</u> 6			
TICLE III PU	TRPOSE	2		CT (A)	CORPORATI	
ourpose for whic	n the corporation	is organized is;	PROFESS	-20071	GRP027/2	
		· · · · · · · · · · · · · · · · · · ·				
					SI CREAR	
	·				72 2 1	
			· · · · ·		5 PH D	
		***************************************				
TCLE IV Sinumber of shares		100			5. <del>5</del> . 5.	
number of shares	of stock is:	RS AND/OR DI		l Titlo:	5 <b>5 5</b>	
Name and T	of stock is:	ERS AND/OR DI	/PRES. Name and		5 5 S	
number of shares	of stock is: VITIAL OFFICE itle: HUGO HE	ERNANDIOR DI ERNANDEZ ALCON A	PRES. Name and		5 <b>5 5</b>	
Name and T	of stock is: VITIAL OFFICE itle: HUGO HE	ERNANDIOR DI ERNANDEZ ALCON A	PRES. Name and AVENUEAddress:		5 5 S	
Name and T Address	of stock is:  WITIAL OFFICE  itle: HUGO HE  375 F  MIAMI	ERNANDEZ ALCON A SPRINGS,	PRES. Name and AVENUEAddress:		5 5 S	
Name and T Address	of stock is:  WITIAL OFFICE  itle: HUGO HE  375 F  MIAMI	ERNANDEZ ALCONA SPRINGS,	PRES. Name and AVENUEAddress:	l Title:	5-5-5-	
Name and Ti	of stock is:  WITIAL OFFICE  itle: HUGO HE  375 F  MIAMI	ERNANDEZ ALCONA SPRINGS,	PRES. Name and AVENUEAddress: FL 33/66  Name and	l Title:	55	
Name and Ti	of stock is:  WITIAL OFFICE  itle: HUGO HE  375 F  MIAMI	ERNANDEZ ALCONA SPRINGS,	PRES. Name and AVENUEAddress: FL 33/66  Name and	l Title:	55	
Name and Ti Address  Name and Ti Address	of stock is:  WITIAL OFFICE  itle: HUGO HE  375 F  MIAMI	RS AND/OR DI ERNANDEZ ALCON A SPRINGS,	PRES. Name and Address:  PL 33/66  Name and Address:	l Title:	55	

Name and T	itle:	Name and Title:	
Address		Address:	
		<del></del>	
	REGISTERED AGENT		
	da street address (P.O. Box NOT acceptable) of		
Name:	HUGO HERNANDEZ		
Address:	375 FALCON AYENUE		
. 2	HUGO HERNANDEZ 375 FALCON AYENUE UTAMI SPAINGS, FL 3	3166	<b>13</b> / SLC
ARTICLE VII I	NCORPORATOR		FIL APR 25 CRELACY
The name and addr	ess of the Incorporator is:		
Name:	HUGO HERNANDEZ		PH ED
Address:	375 FALCON AVENUE	E	= 5
,	HUGO HERNANDEZ 375 FALCON AVENUE MIANI SPINUS, FL	33166	
	as registered agent to accept service of process familiar with and accept the appointment as regi		
	Required Signature/Registered Agent HEANANGE ent and affirm that the facts stated herein are t	,	3/17/13
HUCC	Required Signature/Registered Agent		Daté
I submit this docum	ent and affirm that the facts stated herein are t	rue. I am aware that the false i	nformation submitted in a
document to the Dep	artment of State constitutes a third degree felony	as provided for in s.817.155, F.	S.
1/2	and 1		3/17/18
Hug	Required Signature/Incorporator  O HERNANDEZ	<del> </del>	Date