

P 13000086260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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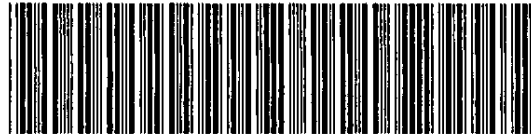
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/27/13--01019--013 **70.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 OCT 21 AM 10:25

10.22/13

COVER LETTER

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

SUBJECT: Howard Handyman Services, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Michael Howard
Name (Printed or typed)

11811 53rd Ct E
Address

Parrish, FL. 34219
City, State & Zip

941-704-8521
Daytime Telephone number

info@Hhandymanservices.com
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

October 11, 2013

MICHAEL HOWARD
11811 53RD CT EAST
PARRISH, FL 34219

SUBJECT: HOWARD HANDYMAN SERVICES, INC.
Ref. Number: W13000056877

RECEIVED
13 OCT 21 AM 11:57
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL 32399

We have received your document for HOWARD HANDYMAN SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent must sign accepting the designation.

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.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 213A00023969

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: Howard Handyman Services, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

11811 53rd Ct E

Parrish, FL 34219

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Handyman Services

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Howard

Name and Title: PRESIDENT

Address Owner/Operator

Address: _____

11811 53rd Ct E

Parrish, FL 34219

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

RECEIVED
13 OCT 21 AM 10:25
CLERK OF SUPERIOR COURT
JANUARY 1, 2021

(conti.)

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: Michael Howard
Address: 11811 53rd Ct E
Parrish, FL 34219

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Michael Howard
Address: 11811 53rd Ct E
Parrish FL 34219

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

Michael Howard

Required Signature/Registered Agent

7-10-2013

Date

9-25-13

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.

[Signature]

Required Signature/Incorporator

10-6-13

Date