

PH0000K32

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

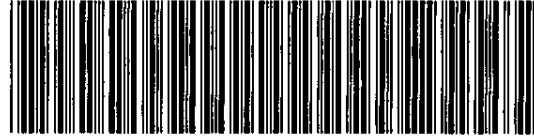
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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15 DEC 29 AM 9:07  
TALLAHASSEE, FLORIDA

Trial	Control (n=10)	MCI (n=10)	AD (n=10)
1	65	65	65
2	70	68	68
3	75	70	68
4	80	72	68
5	85	75	70

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

**SUBJECT:** Harvest Kindness, Incorporated  
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75
Filing Fee	Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75	<input checked="" type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Betty Sandoval  
12842 Elmford Lane  
Boca Raton, Florida 33428  
561-866-0776  
harvestkindness50@gmail.com  
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)

**ARTICLE I NAME**

Harvest Kindness, Incorporated

The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

12842 Elmford Lane

Boca Raton, Fl 33428

Mailing address, if different is:

12842 Elmford Lane

Boca Raton, Fl 33428

**ARTICLE III PURPOSE**

Any and all lawful business.

The purpose for which the corporation is organized is: \_\_\_\_\_

**ARTICLE IV SHARES**

1000

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Betty Sandoval, Chief Executive Officer

Name and Title: none

Address: 12842 Elmford Lane

Address: \_\_\_\_\_

Boca Raton, Fl 33428

Name and Title: None

Name and Title: none

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: none

Name and Title: none

Address: \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
15 DEC 29 AM 5:37  
CLERK OF DISTRICT COURT  
JUDICIAL CIRCUIT IN AND FOR THE 17TH JUDICIAL CIRCUIT  
MIAMI, FLORIDA

Name and Title: none

Name and Title: none

Address

Address:

**ARTICLE VI REGISTERED AGENT**

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

Name: Betty Sandoval  
Address: 12842 Elmford Lane  
Boca Raton, FL 33428

**ARTICLE VII INCORPORATOR**

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

Name: Betty Sandoval  
Address: 12842 Elmford Lane  
Boca Raton, FL 33428

**ARTICLE VIII EFFECTIVE DATE:**

February 01, 2016

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

Betty Sandoval

Required Signature/Registered Agent

12/22/15  
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.*

Betty Sandoval

Required Signature/Incorporator

12/22/15  
Date