

P110000078930

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STATE OF FLORIDA
TALLAHASSEE FLDENR

OCT 03 2017

K. Brumbley

COVER LETTER

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

SUBJECT: Helping Hands at Your Service 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: Dawn M. Hare
Name (Printed or typed)

2232 Marcel Drive
Address

Orange Park, FL 32073
City, State & Zip

904-235-5429
Daytime Telephone number

vhaccountant@comcast.net
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

The name of the corporation shall be: Helping Hands at Your Service Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2232 Marcel Drive

2232 Marcel Drive

Orange Park, FL 32073

Orange Park, FL 32073

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dawn M. Hare, President

Name and Title: Dawn M. Hare, Treasurer

Address: 2232 Marcel Drive

Address: 2232 Marcel Drive

Orange Park, FL 32073

Orange Park, FL 32073

Name and Title: Dawn M. Hare, Secretary

Name and Title: _____

Address: 2232 Marcel Drive

Address: _____

Orange Park, FL 32073

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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CLERK OF CIRCUIT COURT
ORANGE COUNTY, FLORIDA

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: Dawn M. Hare

Address: 2232 Marcel Drive

Orange Park, FL 32073

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dawn M. Hare

Address: 2232 Marcel Drive

Orange Park, FL 32073

ARTICLE VIII EFFECTIVE DATE: 9/28/2017

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 days prior or 90 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

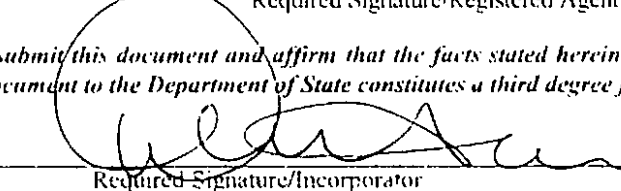


Required Signature/Registered Agent

9/28/2017

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.



Required Signature/Incorporator

9/28/2017

Date

September 28, 2017

Florida Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

To whom it may concern:

I hereby release as corporate owner/ president the corporation named Helping Hands at Your Service Inc. document number P11000033138 to myself, Dawn M. Hare. I do not intend to reinstate the said corporation.

A handwritten signature in black ink, appearing to read "Dawn M. Hare". The signature is written in a cursive style with a large, circular flourish at the beginning. Below the signature, the name "Dawn M. Hare" is printed in a small, sans-serif font.

Dawn M. Hare