

Hope and Recovery Inc.

Joan Hanna 1 3000 Jocelyn Way Spring Hill Florida 34609

Dear; Secretary of State:

32314

Enclosed you will find our Articles of Incorporation for: **Hope and Recovery Inc.** along with a check in the amount of \$ 78.50, (\$35.00 for the filing fee and \$35.00 for the Designation of Registered Agent fee and \$8.50 for the Certificate). If in the future should I want a Certified copy of Articles of Incorporation I will send \$52.50 for them at that time.

Also enclosed are photocopies of the Articles of Incorporation and a self addressed, stamped envelope, please return this duplicate set to us with the filing date and rubber stamps on it and your

Cover Letter and Certificate.

FILED (F)

FOREITH SEE, FLORIDA 56

900002164749--1 -05/02/97--01157--012 ******78.50 ******78.50

Thank you, Law X. Ila

UNCORPORATOR: Joan Hanna Hope and Recovery Inc.

13000 Jocelyn Way Spring Hill, Florida 34609

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Hope and Recovery Inc.

13000 Jocelyn Way, Spring Hill, Florida 34609

Articles Of Incorporation

ARTICLE 1.

The name of the corporation is: Hope and Recovery Inc.

ARTICLE 2.

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE 3.

The principal place of business and mailing address is: 13000 Jocelyn Way, Spring Hill, Florida 34609

ARTICLE 4.

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE 5.

The corporation shall have the authority to issue 500 shares of common stock, in one class only, each with a par value of: \$\$1.00.

ARTICLE 6.

The registered agent of the corporation is: **Joan Hanna**, and the registered address is: 13000 Jocelyn Way, Spring Hill, Florida 34609

ARTICLE 7.

The initial Board of Directors shall have Three (3) member(s).

The names and addresses are as follows:

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President: Mary Ann Masterson, of 13000 Jocelyn Way, Spring Hill, Florida 34609 Vice President: Vincent Masterson, of 13000 Jocelyn Way, Spring Hill, Florida 34609

Secretary: Joan Hanna, of 13000 Jocelyn Way, Spring Hill, Florida 34609 Treasurer: Joan Hanna of 13000 Jocelyn Way, Spring Hill, Florida 34609

The number of directors may be raised or lowered by amendments of the bylaws of the corporation, but shall never be less than one.

ARTICLE 8

INCORPORATOR

The Incorporator of this corporation is: Joan Hanna whose address is: 13000 Jocelyn Way, Spring Hill, Florida 34609 SWORN TO and SIGNED this / day of]]/du

Signature: 🔔

Incorporator, Joan Hanna

REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for the above stated corporation at the place designated in this certificate. I hereby accept the appointment as registered agent and agreed to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties and I am familiar with and accept the obligations of my position as registered agent.

SWORN TO and SIGNED this / day of

Signature:

Registered Agent, Joan Hanna

Hope and Recovery Inc.

13000 Jocelyn Way

Spring Hill, Florida 34609

of 13000 Jocelyn Way, Spring Hill, Florida 34609 STATE of FLORIDA **COUNTY OF HERNANDO** Before me personally appeared, the Incorporator(s), Joan Hanna, known to me to be the person(s) described in and who executed the foregoing Articles of Incorporation and acknowledged before me that he or she, executed this document for the purpose expressed therein. Witness my hand and seal on this i of may , 1997 Notary Signature: <u>fulvil Q Palo</u> Print Notary Name: <u>Richard D. Palo</u> Identification provided was an Florida Drivers license # 11500 492 58 590 -0 NOTARY PUBLIC, STATE OF FLORIDA My Commission Expires: $n/\gamma/98$ RICHARD DIPALO

CHMISSION # CC 419112

EXPIRES NOV 7, 1998

Registered Agent: **Notary Acknowledgment** of 13000 Jocelyn Way, Spring Hill, Florida 34609 STATE of FLORIDA **COUNTY OF HERNANDO** Before me personally appeared, Joan Hanna the Registered Agent, known to me to be the person described in and who executed the foregoing Articles of Incorporation and acknowledged before me that he or she, executed this document for the purpose expressed therein. Witness my hand and seal on this 1 of may, 1997 Print Notary Name: R. charle B. Valu Identification provided was an Florita Driver License # 1.4500 492 58 590-0 NOTARY PUBLIC, STATE OF FLORIDA RICHARD DIPALO My Commission Expires, 11/1/46 Seal Page 3 of 3 () Return Original, () Records Copy (x) State Original,

Incorporator:

Notary Acknoledgment