

P99000105053

Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4001

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

HELPING HANDS, INC. of South Florida

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

December 3, 1999

EMPIRE

SUBJECT: HELPING HANDS, INC.
REF: W99000027635

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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

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SECRETARY OF STA
TALLAHASSEE, FLO

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CERTIFICATE OF INCORPORATION

**OF
HELPING HANDS, INC. of SOUTH FLORIDA**

FIRST : The name of the corporation is : **HELPING HANDS, INC. of SOUTH FLORIDA**

SECOND : The principal office of the corporation is :

**1440 CORAL RIDGE DRIVE #221
CORAL SPRINGS FL 33071**

THIRD : The nature of the business and objects and purposes proposed to be transacted , promoted and carried on are to do any and all things herein mentioned , as fully and to the same extent as natural persons might of could do , and in any part of the world , viz

" The purpose of the corporation is to engage in any lawful act or activity for which the corporation may be organized under the General Corporation Law of the Florida ."

FOURTH : The corporation shall have the authority to issue one hundred (100) shares of Common Stock , each share to have No Par Value . The shares may be issued for the consideration expressed in dollars as may be fixed from time to time by the Board of Directors.

FIFTH : The name and address of the sole incorporator of the corporation is as follows :

**JEFFREY CHAMOFF
1440 CORAL RIDGE DRIVE #221
CORAL SPRINGS FL 33071**

SIXTH : The name and address of the Designated Resident Agent of the Corporation is :

**JEFFREY CHAMOFF
1440 CORAL RIDGE DRIVE #221
CORAL SPRINGS FL 33071**

JEFFREY CHAMOFF, sole incorporator

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Certificate prepared by : **HOWARD R. SCHWARTZ, C.P.A.** 1500 University Drive , Suite 247 ,
Coral Springs , Florida 33071

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CERTIFICATE DESIGNATING (OR CHANGING) PLACE OF BUSSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN THIS STATE , NAMING AGENT UPON
WHOM PROCESS MAY BE SERVED .

In pursuance of Chapter 607.34 , Florida Statutes , the following is submitted in compliance
therewith :

of SOUTH FLORIDA
FIRST : that **HELPING HANDS, INC.** desiring to organize under the laws of the State of
Florida , with the principal office , as indicated in the Articles of Incorporation , and located in
Broward County , Florida , at :

HELPING HANDS, INC.
1440 CORAL RIDGE DRIVE #221
CORAL SPRINGS FL 33071

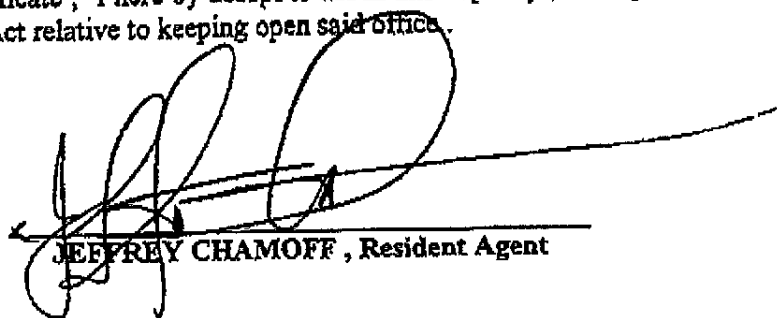
has named

JEFFREY CHAMOFF
1440 CORAL RIDGE DRIVE #221
CORAL SPRINGS FL 33071

as its agent to accept service of process within this state .

SECOND : ACKNOWLEDGMENT (Must be signed by designated Agent) .

Having been named to accept service of process for the above named corporation , at the place
designated in this Certificate , I here by accept to act in this capacity , and agree to comply with
the provisions of said Act relative to keeping open said office .



JEFFREY CHAMOFF , Resident Agent

This Certificate Designating Resident Agent prepared by :

HOWARD R. SCHWARTZ , C.P.A.
1500 University Drive , Suite 247
Coral Spring , Florida 33071

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