

P99000/P8363

Valentine Duruibe
P. O. Box 399124
Miami, FL 33239

City/State/Zip Phone #

600003067486-9
-12/13/99-01067-009
*****79.00 *****78.75

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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- | | | |
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| <input type="checkbox"/> Walk in | <input type="checkbox"/> Pick up time | <input type="checkbox"/> Certified Copy |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait | <input type="checkbox"/> Photocopy |
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NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

S. Thompson DEC 15 1999

Examiner's Initials

12/15
Informed client by letter
Added DR. to ART. 11 + 12
+ Desig. Page. Added suite # + zip
to ART. 11 + suite # only to ART. 12

CR2E031(7/97)

Articles of Incorporation

We, the undersigned, as proper persons acting as incorporators of a corporation under the laws of the state of FLORIDA, adopt the following articles of incorporation:

- FIRST The name of the corporation is: HELP DEPOT INTERNATIONAL CORP.
- SECOND The period of its duration is: INDEFINIT.
- THIRD The purpose of the corporation is: IMPROVE ACCESSIBILITY TO HEALTH CARE AND HEALTHY LIVING CONDITIONS FOR THE INDIGENT.
- FOURTH The aggregate number of authorized shares is: 10000 of \$0.25ea.
- FIFTH The corporation will not commence business until at least \$1000 dollars have been received by it as consideration for the issuance of shares.
- SIXTH Cumulative voting of shares of stock [~~is~~] [is not] authorized.
- SEVENTH Provisions limiting or denying to shareholders the pre-emptive right to acquire additional or treasury shares of the corporation are:
Must be approved by the President & CEO or his legally authorized representative.
- EIGHTH Provisions for regulating of the internal affairs of the corporation are:
The initial registered agent of the corporation shall own at least 51% of the total shares and votes on corporation matters,

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NINTH

The address of the initial registered office of the corporation is:

777 NE 79th Street, #100, Miami, FL. 33138

and the name of its initial registered agent at such address is:

Dr. Valentine A. Duruibe

TENTH

Address of the principal place of business is: 1490 N.W. 3rd Ave.

105-6 Miami, FL. 33136

ELEVENTH The number of directors constituting the initial board of directors of the corporation is 1, and the names and address of the persons who are to serve as directors until the first annual meeting of shareholders or until their successors are elected and shall qualify are:

Name	Address
<u>Dr. Valentine A. Duruibe</u>	<u>777 NE 79th St., Miami, FL. 33138</u> <u>#100</u>
<u></u>	<u></u>
<u></u>	<u></u>

TWELFTH The name and address of each incorporator is:

Name	Address
<u>Dr. Valentine A. Duruibe</u>	<u>777 NE 79th St., Miami, FL. 33138</u> <u>#100</u>
<u></u>	<u></u>
<u></u>	<u></u>

Date 12-10-99

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: HELP DEPOT INTERNATIONAL CORP.

2. The name and address of the registered agent and office is:

Dr. Valentine A. Duruibe

(Name)

777 NE 79th Street #100,

(P.O. Box NOT acceptable)

Miami, Florida 33138

(City/State/Zip)

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 agree 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.

SIGNATURE 

Incorporator/Registered Agent

DATE 12-10-99

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