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Effective Date 5-14-07

COVER LETTER

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

SUBJECT: The Nassau County Autism Foundation				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed is 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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate PY REQUIRED	
FROM: Stacy Johnson				
Name (Printed or typed)				
96063 Estate Drive				
Address				
Yulee, Fl 32097				
City, State & Zip				
904-261-5485				
Daytime Telephone number				

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 4, 2007

STACY JOHNSON 96063 ESTATE DRIVE YULEE, FL 32097

SUBJECT: THE NASSAU COUNTY AUSTISM FOUNDATION

Ref. Number: W07000021617

We have received your document for THE NASSAU COUNTY AUSTISM FOUNDATION. However, the document has not been filed and is being returned for the following:

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole Document Specialist New Filing Section

Letter Number: 807A00031463

ARTICLES OF ORGANIZATION OF The Nassau County Autism Foundation Corp.

The undersigned, for the purpose of forming a not for profit corporation under the laws of Florida, adopts the following Articles of Organization:

Article 1 Name

Section 1.1. Name. The name of this not for profit corporation shall be The Nassau County Autism Foundation Corp.

Article II **Principal Office and Mailing Address**

Effective Date 5-14-07

Section 2.1. Principal Office and Mailing Address. The principal office address and mailing address of this not for profit corporation shall be 96063 Estate Drive, Yulee FL 32097.

Article III Purposes

Section 3.1. Purposes. This Not for Profit Corporation is organized for the purpose of transacting any or all lawful business permitted under the laws of the United States of America and of the State of Florida. Its purpose is to promote awareness, education, and funding for families of children with Autism in Nassau County, Florida.

Article IV Management

Section 4.1. Management. The not for profit corporation is to be managed by the Officers/Directors elected in accordance with the Operating Agreement of the not for profit corporation. Upon the effective date of the corporation Stacy Johnson, Steven Johnson, Anthony Brauda, and Jeanette Brauda will act as Initial Directors and will later appoint a Board of Directors to assist in corporate matters. The Initial Directors will have authority to act on behalf of the not for profit corporation and shall open a bank account on behalf of the corporation.

Article V Initial Registered Agent and Address

<u>Section 5.1.</u> Name and Address. The name and street address of the initial registered agent of this not for profit corporation are:

Stacy Johnson 96063 Estate Drive Yulee, Fl 32097

Article VI Effective Date: Duration

<u>Section 6.1. Effective Date.</u> The existence of this not for Profit Corporation shall commence on the date these Articles are executed.

Article VII Operating Agreement

Section 7.1. Operating Agreement. The initial Operating Agreement of this not for profit corporation shall be adopted by the Initial Directors. The Operating Agreement shall be adopted, altered, amended or repealed from time to time as provided in the Operating Agreement.

Article VIII Name and Address of Incorporator

<u>Section 8.1 Name and Address of Incorporator.</u> The name and street address of the incorporator of this not for profit organization are:

Stacy Johnson 96063 Estate Drive Yulee, Fl 32097

IN WITNESS WHEREOF, the undersigned member has executed these Articles of Organization the 14th of May 2007.

Jeanene Brauda

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF FLORIDA STATUTES, THE UNDERSIGNED NOT FOR PROFIT CORPORATION SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the not for profit corporation is: The Nassau County Autism Foundation Corp.
- 2. The name and the Florida street address of the registered agent are: Stacy Johnson, 96063 Estate Drive, Yulee, Florida 32097.
- 3. Having been named as registered agent and to accept service of process for the above-stated not for profit 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 as provided for in Chapter 608, Florida Statutes.

Stacy Johnson

(Johnson

2007 HAY 16 AH 7: 52 SECRETARY OF STATE