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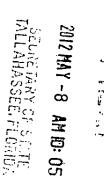
| (Requestor's Name) | | | | |
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| PICK-UP WAIT MAIL | | | | |
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| (Business Entity Name) | | | | |
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| (Document Number) | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

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

| SUBJECT: MEN | IA Foundation, Inc |). TE NAME – <u>MUST INCL</u> | UDE SUFFIX) | |
|-------------------------|--|-------------------------------------|---|------------|
| | | | | |
| | | | | |
| Enclosed is an origina | I and one (1) copy of the Artic | cles of Incorporation and | d 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 | |
| • | | ADDITIONAL COPY REQUIRED | | |
| | | | | |
| FROM | 1: Gloria J. DeFeo | _ | | |
| | Name (Pr | inted or typed) | | |
| 6145 Balboa Circle #402 | | | 725 | |
| | A | ddress | 2012 HAY SEORETA ALLAHAS | * ~ |
| | Boca Raton, FL | 33433 | 65 Pu - 1 | 12 . |
| | City, S | State & Zip | — | 7.74 |
| 561.414.6660 | | | | . # 1 |
| | 6145 Ballbay0inde™ | dephone number | AM ID: 0S | ŕ |
| | gloriadefeo@co | omcast.net | J. | |
| • | E-mail address: (to be used for | future annual report notifica | tion) | |

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

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

| The name of the co | orporation shall be: | ı, Inc. | |
|--|--|---|--|
| ARTICLE II | PRINCIPAL OFFICE | | |
| | Principal street address | | Mailing address, if different is: |
| | 6145 Balboa Circle #402 | | |
| | Boca Raton, FL 33433 | | |
| ARTICLE III | <u>PURPOSE</u> | | |
| The purpose for w | which the corporation is organized is: | | |
| Mena Foundation was fou the voices that have been | unded by lost voices who suffered in the midst of the Arab Spring in numbed or silenced by the recent developments in the area and |) and have yet to be heard. We are an organ d help them be heard and expressed freely. | nization that aims to reach the voices that have not been heard, |
| Our mission is to amplify f MENA region and the 21s | forgotten voices advocating for change in the belief that physical it century tools to communicate their message using digital medi | upnsing is not the only way out and by educe a . | cating the silent majority on the power of a pen throughout the |
| We are a grassroots not-fo | or-profit movement that operates independently of any partisan, | corporate, national or regional government, | institution or organization. |
| ARTICLE IV | MANNER OF ELECTION The man | mer in which the directors are e | elected and appointed: |
| | itil full BOD approved and elected | | |
| ARTICLE V | INITIAL OFFICERS AND/OR DIRE | | |
| Name and 1: Address: | itie: | Name and True: | |
| Address. | | | |
| | | | |
| Name and T | tale. | Name and Title | |
| Address: | itte: | | |
| Audiess. | | | |
| | | | |
| | | | |
| | itle: | Name and Title: | |
| Address: | | Address: | |
| | | | |
| | | | |
| ARTICLE VI | REGISTERED AGENT | | |
| | orida street address (P.O. Box NOT accepta | ble) of the registered agent is: | 725 29 |
| Name: | Gloria J. DeFeo | | .L. 17 |
| Address: | 6145 Balboa Circle #402 | · | |
| | Boca Raton, FL 33433 | | |
| | | | Service Control of the control of th |
| ARTICLE VII | INCORPORATOR | | ترين 🚅 |
| The <u>name and ado</u> | dress of the Incorporator is: | | |
| Name: | Gloria J. DeFeo | | |
| Address: | 6145 Balboa Circle #402 | | |
| | Boca Raon, FL 33433 | |) - CA |
| | | | e de la companya del companya de la |
| | ied as registered agent to accept service of miliar with and accept the appointment as r | | corporation at the place designated in this |
| cernjicale, i um ju | nuttur with and accept the appointment as re | egisiereu ageni una agrec io a | ct in this cupacity |
| C | all a holder | | 51312012 |
| | Required Signature of Registered A | | Data |
| | () Required Signature of Registered A | gent | . Date |
| l submit this docu | ment and affirm that the facts stated herein | are true. I am aware that an | y false information submitted in a document |
| | of State constitutes a third degree felony as | | |
| • | 11. ~ 1 4. | , | < 12 12011 |
| | Which all the | | مراحدا درا ب |

Date

Required Signature of Incorporator