

N180000001469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

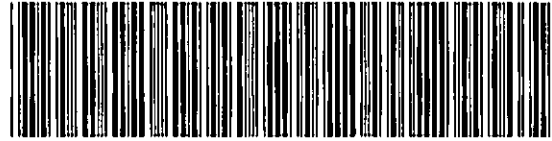
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 12 2018
T SCHROEDER

COVER LETTER

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

SUBJECT: The Joshstice League Foundation, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

\$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Aaron Levitan
Name (Printed or typed)

2947 Summerfield Road
Address

Winter Park, Florida 32792
City, State & Zip

407-310-0269
Daytime Telephone number

debaaronator1995@outlook.com
E-mail address: (to be used for future annual report notification)

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

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

ARTICLE I NAME

The name of the corporation shall be: The Justice League Foundation, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

2947 Summerfield Road
Winter Park, Florida 32792

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of this corporation is exclusively for charitable, educational and scientific purposes including for such purposes of distributions to organizations that qualify as exempt under Section 501(c)(3) of internal revenue code and states this corporation is specifically formed to advance educational opportunities for Special Needs Children and advance the interests and bring attention to same.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: _____

Bi-Annual elections

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cherie Johnson - Director Name and Title: _____

Address: 518 Sunel Wedge Loop Address: _____
Apopka, Florida 32712

Name and Title: Deborah Keweller Leviten / Director Name and Title: _____

Address: 2947 Summerfield Rd Address: _____
Winter Park, Florida
32792

Name and Title: Aaron Leviten / Director Name and Title: _____

Address: 2947 Summerfield Rd Address: _____
Winter Park, Florida
32792

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TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Aaron Leviten
Address: 2947 Summerfield Rd.
Winter Park, Florida 32792

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REGISTRY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Aaron Leviten
Address: 2947 Summerfield Rd
Winter Park, Florida 32792

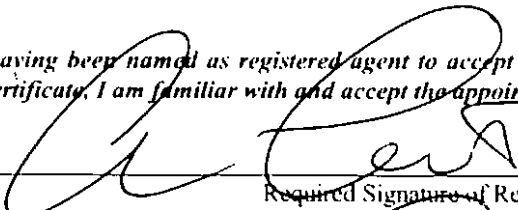
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

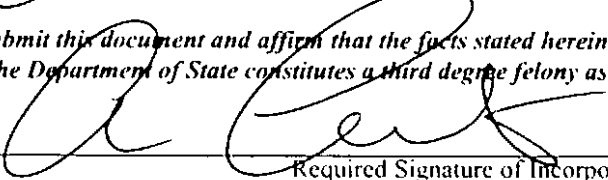
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature of Registered Agent

1/19/18
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature of Incorporator

1/19/18
Date