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COVER LETTER

Corrected Copy

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

Neuroacanthe	ocytosis Advocacy USA, Inc.						
	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)						
Enclosed is an original a	and one (1) copy of the Arti	cles 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 CO	PY REQUIRED				
FROM:	Joyce Willard-Williford	ne (Printed or typed)	_				
	2285 Harlock Road		_				
		Address					
	Melbourne, FL 32934						
		City, State & Zip	_				

321-243-4545

joy.williford@gmail.com

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

E-mail address: (to be used for future annual report notification)

Daytime Telephone number

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

ARTICLE II	PRINCIPAL OFFICE			
	Principal street address:		Mailing address, if different is:	
2285	Harlock Road			
Melbo	ourne, FL 32934			
ARTICLE III The purpose for neuroacanthoc	r which the corporation is organized is:	o operate a charitable	e organization that offers support to persons	with
			the causes and treatment of neuroacanthocy	
related disease		<u> </u>		-
		-		
				· · · · · ·
			elected at an	nual mee
<u>ARTICLE IV</u>	MANNER OF ELECTION The man	nner in which the dire	ctors are elected and appointed:	nual mee
ARTICLE IV	MANNER OF ELECTION The man	nner in which the dire	ctors are elected and appointed:	nual mee
ARTICLE IV ARTICLE V			clected at ar	nual mee
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	CTORS	Willard Williford Toyce VP/Sec/Treas	nual mee
ARTICLE V Name and Title	INITIAL OFFICERS AND/OR DIRECT		Willard Williford Toyce VP/Sec/Treas	nual mee
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT Wagner, Susan, President	CTORS Name and Title	Willard-Williford, Joyce, VP/Sec/Treas	nual mee
ARTICLE V Name and Title Address	Wagner, Susan, President 14A Edge Court Greenville, SC 29609	CTORS Name and Title Address:	Willard-Williford, Joyce, VP/Sec/Treas 2285 Harlock Road Melbourne, FL 32934	nual mee
ARTICLE V Name and Title Address Name and Title	Wagner, Susan, President 14A Edge Court Greenville, SC 29609	CTORS Name and Title Address: Name and Title	Willard-Williford, Joyce, VP/Sec/Treas 2285 Harlock Road Melbourne, FL 32934	nual mee
ARTICLE V Name and Title Address	Wagner, Susan, President 14A Edge Court Greenville, SC 29609 Walker, Ruth	CTORS Name and Title Address:	Willard-Williford, Joyce, VP/Sec/Treas 2285 Harlock Road Melbourne, FL 32934 Metzger, Robert Director	
ARTICLE V Name and Title Address Name and Title Address	Wagner, Susan, President 14A Edge Court Greenville, SC 29609 Walker, Ruth 17 Courtney Avenue Newburgh, NY 12550	CTORS Name and Title Address: Name and Title Address: Address:	Willard-Williford, Joyce, VP/Sec/Treas 2285 Harlock Road Melbourne, FL 32934 Metzger, Robert 1431 Washburn Avenue, North Minncapolis, MN 55411	
ARTICLE V Name and Title Address Name and Title	Wagner, Susan, President 14A Edge Court Greenville, SC 29609 Walker, Ruth 17 Courtney Avenue Newburgh, NY 12550	CTORS Name and Title Address: Name and Title	Willard-Williford, Joyce, VP/Sec/Treas 2285 Harlock Road Melbourne, FL 32934 Metzger, Robert 1431 Washburn Avenue, North Minncapolis, MN 55411	19 0 CT

London SW5, 0DN

Name and Title:		Name and Title:	
Address		Address:	
_			
Name and Title:_		Name and Title:	
Address		Address:	
_			
_			
	REGISTERED AGENT		
The name and Flo	orida street address (P.O. Box NOT accep	ptable) of the registered agent is:	
Name:	Joyce Willard-Williford		10 W.C
Address:	2285 Harlock Road		19 OCT
	Melbourne, FL 32934		1 25
			Record
	INCORPORATOR dress of the Incorporator is:		二
Name:	Joyce Willard-Williford		-3
Address:	2285 Harlock Road		
	Melbourne, Fl 32934		
Effective date if	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific an	. (OPTIONAL) ad cannot be more than five days prior or 90 days after	the filing.)
Note: If the date document's effect	inserted in this block does not meet the aptive date on the Department of State's reco	oplicable statutory filing requirements, this date will not be ords.	: listed as the
certificate, I am f	amiliar with and accept the appointment of	of process for the above stated corporation at the place as registered agent and agree to act in this capacity	designated in this
_ Tul	Nille - Willy Construction Required Signature of Registered	16/22/2	<u>1019</u>
I submit this doc	Required Signature of Registered	ein are true. I am aware that any false information submit	tted in a document
to the Departmen	t of State constitutes a third degree felony	as provided for in s.817.155, F.S.	
- Pli	Required Signature of Incom	10/27	2019
$\langle \rangle$	Required Signature of Incom	грогацог	