

NO7000008542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

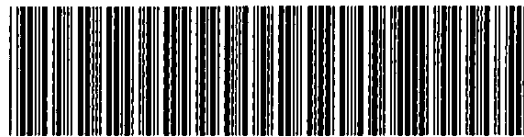
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FILED
07 AUG 29 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: ARBOR RIDGE PTSA, 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:

SHARLENE PRINCE-PHILLIP
Name (Printed or typed)

2900 Logandale Drive
Address

Orlando, FL 32817
City, State & Zip

(407) 677-6400 - (407) 672-3110
Daytime Telephone number ext 2315

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

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

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CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

ARBOR RIDGE PTSA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2900 Logandale Drive Orlando, FL 32817

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BE Advocates for our children at the Arbor Ridge K-8 School. To raise funds to benefit our children and school.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Nominated by the Executive Board (Nominating Committee)

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

- | | |
|---|--|
| <i>1. Sharlene Prince-Phillip - President</i> | <i>4. Paige Tracy 3rd Vice President</i> |
| <i>2. Marlene Miller - 1st Vice President</i> | <i>5. Martha Albert Treasurer</i> |
| <i>3. Angel Coleman - 2nd Vice President</i> | <i>6. Romi Taylor Secretary</i> |
| | <i>7. Jan Howard - Officer</i> |

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

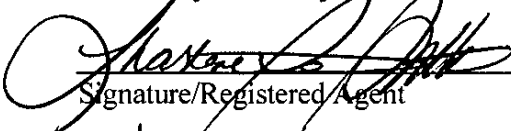
*Sharlene Prince Phillip
5355 Goldenwood Drive
Orlando, FL 32817*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Martha Albert
9520 Chardonnay Drive
Orlando, FL 32802*

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.


Signature/Registered Agent

8/10/07
Date

Martha Albert
Signature/Incorporator

8/10/07
Date