

N18 000 000 412

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

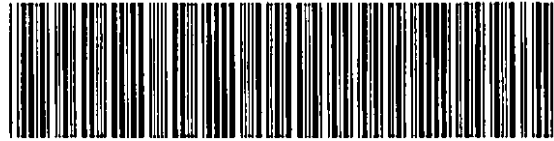
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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JAN 11 2018

## COVER LETTER

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

SUBJECT: THE LIDDELL FOUNDATION INCORPORATED  
(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: WILLIE LEE LIDDELL, JR  
Name (Printed or typed)

4519 DEANVILLE WAY  
Address

PENSACOLA, FL 32505  
City, State & Zip

850-368-9235  
Daytime Telephone number

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 LIDDELL FOUNDATION INCORPORATED

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

Mailing address, if different is:

4519 DEANVILLE WAY

PENSACOLA, FL

32505

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: TO PROVIDE MATERIAL AND SPIRITUAL SUPPORT FOR THE CHILDREN AND HOMELESS IN NORTH WEST FLORIDA.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: TWO-THIRDS MAJORITY VOTE BY CURRENT BOARD MEMBERS

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

WILLIE LEE LIDDELL, JR  
Name and Title: - CHAIRMAN

Address: 4519 DEANVILLE WAY  
PENSACOLA FL  
32505

ROBERT A. LIDDELL - CEO  
Name and Title:

Address: 4519 DEANVILLE WAY  
PENSACOLA, FL  
32505

Name and Title: -

Address: -

MILANI J.A. LIDDELL  
Name and Title: - PRESIDENT

Address: 4519 DEANVILLE WAY  
PENSACOLA, FL  
32505

Name and Title: -

Address: -

-

-

Name and Title: -

Address: -

-

-

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|                       |                       |
|-----------------------|-----------------------|
| Name and Title: _____ | Name and Title: _____ |
| Address: _____        | Address: _____        |
| _____                 | _____                 |
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| _____                 | _____                 |
| Name and Title: _____ | Name and Title: _____ |
| Address: _____        | Address: _____        |
| _____                 | _____                 |
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| _____                 | _____                 |

**ARTICLE VI REGISTERED AGENT**

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

Name: WILLIE L. LIDDELL, JR.  
Address: 4519 DEANVILLE WAY  
PENSACOLA, FL 32505

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: WILLIE L. LIDDELL, JR.  
Address: 4519 DEANVILLE WAY  
PENSACOLA, FL 32505

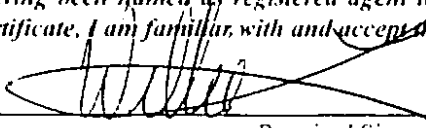
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 1-3-18 (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

1-3-18  
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

1-3-18  
Date