Requester's Name	2001988
Sandra Governo	o.e.
(NAME) 3219 PINELIAS PLAC (P.O. Box or Mail Drop Box NOT A	5000031569860 -03/03/0001038015 *******? 50
TAMPA, Florida 3.	3610
CORPORATION NAME(S) & DOCUM	
1(Corporation Name)	(Document #)
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(Corporation Name)	(Document #) R 27 PH 3: 38 (Document #)
3(Corporation Name)	(Document #)
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4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time	Certified Copy
Mail out Will wait	
NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	 □ Amendment □ Resignation of R.A., Officer/Director □ Change of Registered Agent □ Dissolution/Withdrawal □ Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement
W00-65T3	☐ Trademark ☐ Other

CR2E031(7/97)

K. Rolfe

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MAR 2 7 2000

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 10, 2000

SANDRA GOVERNOR 3219 PINELLAS PLACE TAMPA, FL 33619

SUBJECT: PRM, INC.

Ref. Number: W00000006513

We have received your document for PRM, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6924.

Kimberly Rolfe Corporate Specialist Supervisor

Letter Number: 300A00013441

ARTICLES OF INCORPORATION OF PRM-WORKS, INC.

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ONE:

The name and address of this principle corporation is the PRM-Works, Inc., 3219 Pinellas Place, Tampa, Florida 33619, in Hillsborough County. This Corporation is organized pursuant to FLORIDA Nonprofit Corporation Code.

TWO:

This Corporation is a nonprofit public benefit corporation and is not organized for the private gain of any person. This Corporation is organized under the Nonprofit Public Benefit Corporation Law for Charitable and Educational purposes to aid poor and disadvantaged individuals and families towards a life of self-sufficiency. The programs will consist of but not limited to: Job Training/Placement, Referrals, Advocacy, Housing, Employment, Literacy, Counseling, Temporary Shelter, Teenage Pregnancy, Substance Abuse Awareness and Prevention, Tutorial, AIDS Education, Elderly Care, and other programs to aid those in need.

THREE:

The duration of this Corporation shall be perpetual, no stock and shall have no members.

FOUR:

The address of the Registered office is 3219 Pinellas Place, Tampa, Florida 33619. The name and address of the registered agent of this Corporation shall be:

Sanda SovenSignature)
Sandra Governor
3219 Pinellas Place

Tampa, Florida 33619

FIVE:

(a) This Corporation is organized and operated exclusively for Educational and Charitable purposes within the meaning of Section 501 (c)(3) of the Internal Revenue Code.

(b) Not-withstanding any other provision of these Articles, the corporation shall not carry on any other activities not permitted to carry on (1) by a corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code or (2) by a corporation contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code.

SIX:

The Directors are elected in accordance with the Bylaws. The name and address of the persons appointed to act as the initial Directors of this corporation are:

NAME	ADDRESS
Sandra Governor	32l9 Pinellas Place
President	Tampa, Florida 33619
Romona Governor	3219 Pinellas Place
Secretary	Tampa, Florida 33619
Vance Governor	3219 Pinellas Place
Treasurer	Tampa, Florida 33619

SEVEN:

The property of this Corporation is irrevocably dedicated to Charitable and Educational purposes and no part of the net income or assets of the organization shall ever inure to the benefits of any director, officer or member thereof or the benefit of any private person.

EIGHT:

On the dissolution or winding up of this Corporation, its assets remaining after payment of, or provision for payment of, all debts, and liabilities of this corporation, shall be distributed to a nonprofit fund, foundation, or corporation, which is organized and operated exclusively for, Educational and Charitable under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government for a public purpose. Any such asset not disposed of shall be disposed by the Court of Common Pleas of the county in which the principal office of the organization is located. Court shall determine which are organized and operated exclusively for such purposes.

NINE:

Executed on February 7, 2000. The name and address of the incorporator of this Corporation shall be:

Sandra Louinen (Signature) Sandra Governor 3219 Pinellas Place

Tampa, Florida 33619

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is: PRM-WORKS, INC.		
2.	The name and address of the registered agent and office is:	00	
	Sandra Governor ILAHASSEE (NAME)	00 MAR 27 P	7
	(P.O. Box or Mail Drop Box NOT Acceptable)	PM 3: 38	
	Tampa Florida 33619		

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointments as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Sandra Adversage March 15, 2000 (SIGNATURE) (DATE)