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

SUBJECT: Florida COPS for Kids Foundation, Inc

(Proposed corporate name – must include suffix)

800003297658--3
-06/20/00-01039-017
****210.00 ******70.00

Enclosed is an original and one(1) copy of the articles of incorporation and a checkfor:

ॐ \$70.00 Filing Fee

© \$78.75 Filing Fee & Certificate of Status

© \$78.75 Filing Fee & Certified Copy © \$8750 S Filing Fee, C Certified Co

& Certificate

ADDITIONAL COPY REQUIRED

FROM: _	David Murrell	
	Name (Printed or typed)	
	300 East Brevard Street	
	Address	
	Tallahassee, FL 32301	ZALAH ZALAH

City, State & Zip 222-3329

Daytime Telephone number

Call when perby

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

T.SMITH "IN 2 0 2000

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be: Florida COPS for Kids Foundation, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 300 East Brevard Street, Tallahassee, FL 32301

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

To Sponsor charitable activities to help children in need.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

Biannual Conference

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

David Murrell

300 East Brevard Street, Tallahassee, FL 32301

ARTICLE VI INCORPORATOR

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 appointment 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.

Signature/Registered Agent Co-20-00

Date