

TRANSMITTAL LETTER

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

SUBJECT: SunShine CareGivers of Tampa, Inc.

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

☐ \$70.00 Filing Fee  
☒ \$78.75 Filing Fee & Certificate of Status

☐ \$ 78.75 ☐ \$ 87.50  
ADDITIONAL COPY REQUIRED

FILED  
00 JUN 26 AM 10:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FROM: Debra Jackson  
Name (Printed to typed)  
11110 N 21<sup>st</sup> Street  
Address  
Tampa, Florida 33612  
City, State & Zip  
813-971-3426  
Daytime Telephone number

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

900003304369--7  
-06/26/00--01084--011  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Debra Jackson GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Art. IV  
DATE 10-24-00  
DOC. EXAM 119C

6-29  
WC

ARTICLES OF INCORPORATION  
OF

SUNSHINE CARE GIVERS OF TAMPA, INC.  
A NONPROFIT CORPORATION

FILED  
00 JUN 26 AM 10:34  
TALLAHASSEE FL 32301  
SECRETARY OF STATE

**Article 1. Name.** The name of the Corporation is: SUNSHINE CARE GIVERS OF TAMPA, INC.

**Article 2. Duration.** The duration of the Corporation is perpetual.

**Article 3. Purposes.** The purpose of the Corporation is as follows:

- A. This corporation is a not-for-profit corporation organized under Chapter 617, Florida Statutes. It is not organized for the private gain of any person. The specific purposes of this corporation are to provide mentoring and support ministries to Christian women and the general public.
- B. To exercise all rights and powers conferred by the laws of the State of Florida upon nonprofit corporations.
- C. Provided, however, that the corporation shall not engage in any action which is not permitted to be carried on by nonprofit corporation under the INTERNAL REVENUE CODE and no part of the net earnings of the Corporation shall inure to the benefit of or be distributable to its members, directors, or officers; but the Corporation shall be authorized and empowered to pay reasonable compensation to these people for services rendered, and to make payments and distributions in furtherance of its stated purposes.

**Article 4. Members.** The Corporation shall have Voting Members, who shall be elected (and may be removed) by the Voting Members, and who shall have all the rights and privileges of members of the Corporation. The Bylaws may provide for Nonvoting Members of one or more classes, who shall be admitted in such manner and who shall have such rights and privileges as are set forth in the Bylaws, but who shall not have the right to vote. The name and address of each initial Voting Member is as follows: *The Members are also directors.*

| Name  | Address |
|---|---------|
| <u>Debra Jackson 11110 N. 21<sup>st</sup> St. Tampa, Florida 33612</u>    |         |
| <u>Elisha Bruton 9426 Windermere Drive, apt 304, Tampa, Florida 33619</u> |         |
| <u>Carolyn A. Hill E. 2015 Rampart St. Tampa, Florida 33604</u>           |         |
| <u>Geneva Hall 3250 Broadway, apt 6-G, New York City, New York 10027</u>  |         |
| <u>Teresa Green 1711 Lambright, Tampa, Florida 33610</u>                  |         |

**Article 5. Initial Registered Agent and Office.** The initial registered agent is Debra Jackson and the initial registered office 11110 N. 21<sup>st</sup> Street, Tampa, Florida 33612

*Address is the same.*

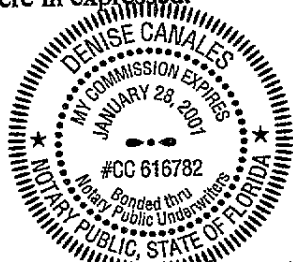
*The principal*

N WITNESS WHEREOF, the undersigned have signed these Articles of Incorporation on this day of  
May 11, 2000.

Debra Jackson  
(Signature of Corporator) Registered Agent

Acknowledged before me on 6/22/00 by DEBRA JACKSON who is  
[date] [name]  
is personally known to me/ — produced DRIVER LICENSE as identification, and who  
[document] # J250-160-52-709-D

executed the foregoing Articles of Incorporation and acknowledged to and before me that he/she executed said instrument for the  
purposes there in expressed.



Denise Canales  
NOTARY PUBLIC STATE OF FLORIDA  
Name: DENISE CANALES  
My Commission No. 1-28-01

STATE OF FLORIDA  
Hillsborough  
County

I have read the statutory requirements for being a registered agent and I accept designation as registered agent

11110 N 21<sup>st</sup> St.  
Tampa, FL 33612