

TRANSMITTAL LETTER

N010000001866

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

APPROVED
AND
FILED
01 MAR 16 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: The HBCH Foundation, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200003856122--9
-03/16/01--01064--006
*****78.75 *****78.75

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: Victor Oden
Name (Printed or typed)

412 West 4th Avenue,
Address

Tallahassee, FL 32304
City, State & Zip

222-2220
Daytime Telephone number

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

3-16-01
W

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

The HBCU Foundation, Inc.

ARTICLE II PRINCIPAL OFFICE

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

412 West 4th Avenue, Suite #2, Tallahassee, FL 32304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To recruit college bound students for Historically Black Colleges and Universities

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors shall be elected as according to the By-laws

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name and addresses:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Victor Oden
412 West 4th Avenue Suite #2
Tallahassee, FL 32304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Victor Oden
412 West 4th Avenue #2
Tallahassee, FL 32304

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.

Victor Oden
Signature/Registered Agent

3/16/01
Date

Victor Oden
Signature/Incorporator

3/16/01
Date