N01000004498

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

01 JUN 25 PH 3: 46

SECRETARY OF STATE TALLAHASSEE FLORIDA

SUBJECT: BANKSPAR Foundation Unc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

40004339454--9 -06/04/01--01053--010 ******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: PATRICIA BANKS
Name (Printed or typed)

18705 Chemille Orive

LUTZ, bloida 33549

813-949-5554 Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 18, 2001

PATRICIA BANKS 18705 CHEMILLE DR LUTZ, FL 33549

Ref. Number: W01000013086

813)949-5554

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

Written approval and clearance of the terms BANK, BANKER, BANKING, TRUST COMPANY, BANCSHARES, SAVINGS & LOAN ASSOCIATION, SAVINGS BANK, or CREDIT UNION or words of similar import, must be obtained from the Division of Banking, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Name Approval Request" form to be filled out and sent to the address indicated on the form. If the proposed name is approved by the Division of Banking, resubmit the document and approval letter to the Division of Corporations for filing.

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) 487-6052.

Dale White Document Specialist New Filings Section

Letter Number: 001A00036964



OFFICE OF THE COMPTROLLER

DEPARTMENT OF BANKING AND FINANCE STATE OF FLORIDA

TALLAHASSEE 32399-0350

01 JUN 25 PM 3: 46

SECRETARY OF STATE TALLAHASSEE FLORIDA

June 22, 2001

Patricia Banks 18705 Chemille Drive Lutz, Florida 33549

Dear Ms. Banks:

Re: "Bankspar Foundation, Inc."

Thank you for your recent letter/fax requesting approval for use of the above-referenced name.

It is the opinion of this Department that the above-referenced corporate name is definitive enough to differentiate the business being conducted from that of a commercial bank or trust company. Therefore, the Department does not object to your use of the above-referenced name being registered to conduct business in the state of Florida.

Sincerely,

Alex Hager Director

AH:kr

cc: Karon Beyer, Chief, Bureau of Corporate Records
Division of Corporations, Secretary of State's Office

Division of Banking 101 East Gaines Street, Suite 636, Telephone: (850) 410-9111

Ro

TOTAL P.03

ARTICLES OF INCORPORATION	2 (% e% e%)
In Compliance with Chapter 617, F.S., (Not for Profit)	
ARTICLE I NAME The name of the corporation shall be:	
BANKSPAR FOUNDATION, Unc.	01 JUN 25 PM 3: 46
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be	SECRETARY OF STATE TALLAHASSEE FLORIDA
18705 Chemille Drive > P. O. Box 3	
14.57	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	33699-3013
Facilitating improved health by active	alignment of Individual
Facilitating improved health by active guidance to provide professional Speci	lalized Services for
The manner in which the directors are elected or appointed:	to achieve personalized the through available conseils
are as Indicated in our bylaws.	Consella C
ARTICLE V INITIAL DIRECTORS OFFICERS The name and addresses:	
Patricia Banks, President	
18705 Chemille Drive	
LUTZ, Clorida 33549	
ARTICLE VI INITIAL REGISTERED AGENT AND STREET AT The name and Florida street address of the registered agent is:	DDRESS
PATRICIA BANKS, Registered agent	
18705 Chemille, Maria	
ARTICLE VII INCORPORATOR 33549-2818	
The <u>name and address</u> of the Incorporator is: PATRICIA BANKS	
18765 chemillo, DAILLES	•
**************************************	*********
Having been named as registered agent to accept service of process for the above state in this certificate, am familiar with and accept the appointment as registered agent a	ed corporation at the place designated nd agree to act in this capacity.
Latricia Barks	
Signature/Registered Agent	Date
Johnia Banks	(dos/0) 8 (d/3/0) Date (dos/0) 8 (d/3/0)
Signature/Incorporator	Date