NO10000001538

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

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SUBJECT: Dreamlanders Foundation, Inc.

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

\$78.25 Filing Fee & Certified Copy

FROM: FRANK BASCIANU

Name (Printed or typed)

10502 Spr.nc, H. (C. DV.

Address

Spr.nc, A. (C. FL. 34608

City, State & Zip

352-686-313 4

Daytime Telephone number

ARTICLES OF INCORPORATION

OF

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

ARTICLE I NAME

The name of the corporation is Dreamlanders Foundation, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 34470 Cedar Field Dr.

Ridge Manor, FL 33523

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are): Relief of the poor, the distressed, or the underprivileged.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is: Elected by the membership for a period of three years.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Frank A. Basciano 11307 Roland Street Spring Hill, FL 34609

ARTICLE VI INCORPORATOR

The name and address of the In	corporator to these Articles of Incor	poration are:
Alan R. Minthorn	William R. LaRosa, Sr. MD	Mary J. Ware
34470 Cedar Field Dr.	8481 Croom Rital Rd.	3232 Burwell Rd
Ridge Manor, FL 33523	Brooksville, FL 34602	Webster, FL 33597
Alex West	William R. La Rosa, M. D.	Mary J. Ware
Incorporator	Incorporator	Incorporator
Date	Date	Date

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

Date

FILED

OI JUN 27 PM 2: 28

SECRETARY OF STATE