N0100000 77 TRANSMITTAL LETTER

01 0CT 31 PM 12:26

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

SUBJECT: Stamp Out child abuse 2001 INC-(proposed corporate NAME - MUST INCLUDE SUFFIX)

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

□ \$70.00 Filing Fee Filing Fee & Certificate of Status

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<b>3</b> \$78.75		
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ADDITIONAL COPY REQUIRED

FROM: <u>ARNETT Lewis</u> Name (Printed or typed)

800004660828 -10/31/01-01026-026 \*\*\*\*\*\*78.75 \*\*\*\*\*78.75

100 W. BASS St Address

Kissimmee Fl 34741 City, State & Zip

<u>321-278-1136</u> Daytime Telephone number

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

10/31

## ARTICLES OF INCORPORATION

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

The name of the corporation shall be: Storm pout Child Abuse 2001 INC.

## ARTICLE II PRINCIPAL OFFICE

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

108 W. BASS St. Kissimmee Ft. 3474

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To gather, to teach, to shelter, to clothe abused children and to give them a better home.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected or appointed: ALL Directors Shall be apointed by president.

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name and addresses:

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the registered agent is:

108 W. BASS St. Kissimmee Fizyau

ARTICLE VII INCORPORATOR The name and address of the Incorporator is:

ARNETT Lewis 108 W. BASS St. 55 mmee, Fl 34741

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

ARNETT

Signature/Registered Agent

Signature/Incorporator

PH 12: 28

10-31-01

Lewis