

TRANSMITTAL LETTER

No 2000000298

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

FILED
02 JAN 11 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Glass Slipper Foundation Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900004768659--8
-01/11/02--01030--004
*****87.50 *****87.50

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: Nichelle Thomas
Name (Printed or typed)

7740 Southside Blvd Apt 2206
Address

Jacksonville, FL 32256
City, State & Zip

(904) 270-6629
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Glass Slipper Foundation Inc.

ARTICLE II PRINCIPAL OFFICE

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

7740 Southside Blvd Apt 2206
Jacksonville, FL 32256

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Recognizing people in the community that have made the choice to positively improve their lives.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Initial board selected by founder. Board thereafter selected by general board review.

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name(s), address(es) and title(s):

Not Listed.

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

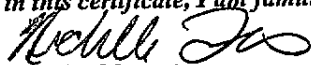
Nichelle Thomas
7740 Southside Blvd Apt 2206
Jacksonville, FL 32256

ARTICLE VII INCORPORATOR

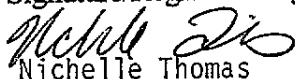
The name and address of the Incorporator is:

Nichelle Thomas
7740 Southside Blvd Apt 2206
Jacksonville, FL 32256

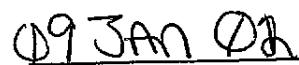
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



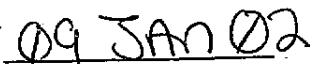
Nichelle Thomas
Signature/Registered Agent


Nichelle Thomas

Signature/Incorporator



Date



Date

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