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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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F. GARNER DEC 30

TRANSMITTAL LETTER

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

SUBJECT: MARTIN WEBB FOUNDATION
(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	☐ $78.75 Filing Fee & Certificate of Status	☐ $78.75 Filing Fee & Certified Copy	☒ $87.50 Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: S. A. MARTIN
Name (Printed or typed)

953 N.E. 91 TERRACE
Address

MIAMI SHORES F/A. 33138
City, State & Zip

305- 751-8379
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)

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ARTICLE I

NAME: Martin Webb foundation Inc.

ARTICLE II

953 N.E 91 Terrace Miami Shores Miami Fla. 33138

ARTICLE III

PURPOSE
Low Income Housing & Outreach to the Poor

ARTICLE IV
ELECTION OF DIRECTORS
Appointed BY MEMBERS

ARTICLE V
DIRECTORS
S.A. MARTIN, E. A. MARTIN, W. GENERETTE

ARTICLE VI
INCORPORATOR & REGISTERED AGENT
S. A. MARTIN 953 N. E. 91 TERRACE MIAMI SHORES FLA. 33138

S.A. Martin
S. A. MARTIN Registered Agent
I ACCEPT AS AGENT....

12/19/2002
DATE

S.A. Martin
S. A. MARTIN Incoporator

12/19/2002
DATE

TAX FEIN 41-2072240