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4-11-03  
[Signature]

TRANSMITTAL LETTER

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

SUBJECT: CULTURAL HOUSE OF CARE INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of  
Status

ADDITIONAL COPY REQUIRED

FROM: CLAUDIA SMITH  
Name (Printed or typed)

422 REED STREET  
Address

CHATTahoochee, FL 32324  
City, State & Zip

850-663-2457  
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)

FILED

## ARTICLE I NAME

The name of the corporation shall be:

CULTURAL HOUSE OF CARE INC.

03 APR 11 AM 11:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

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

P.O. BOX 794 422 REED, CHATTAHOOCHEE, FL. 32324  
CHATTAHOOCHEE, FL. 32324

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide shelter and refuge for children and parents  
due to stress and undesirable unfortunate conditions.

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Appointed By Board

## ARTICLE V INITIAL DIRECTORS/OFFICERS

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

1. CLAUDIA SMITH - Director  
422 REED ST.  
CHATTAHOOCHEE, FL. 32324
2. John Smith - Director  
422 REED ST. CHATTAHOOCHEE, FL. 32324

B. HORTENSE SMITH Director  
284 McLERON Rd.  
Bainbridge, GA. 31717

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

CLAUDIA SMITH  
422 REED ST.  
CHATTAHOOCHEE, FL. 32324

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John W. Smith  
422 REED ST.  
CHATTAHOOCHEE, FL. 32324

\*\*\*\*\*  
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.

Claudia Smith  
Signature/Registered Agent

04-11-03  
Date

John W. Smith  
Signature/Incorporator

04-11-03  
Date