

N03 0000004084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

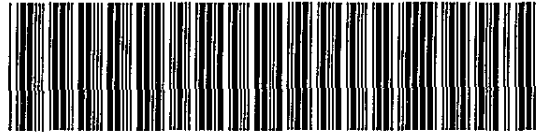
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/06/03--01075--006 **78.75

FILED
03 MAY -6 PM 3:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Pasquoatank Action Council, 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

☒ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Veronica Lax
Name (Printed or typed)

11331 Beacon Dr.
Address

Jacksonville, FL 32225
City, State & Zip

904-646-0034
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:

Pasquotank Action Council, Inc

ARTICLE II PRINCIPAL OFFICE

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

11331 Beacon Dr, Jacksonville, FL 32225

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Assist the underserved community by providing services which will improve the quality of life of individuals.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Board nominees and elections.

ARTICLE V INITIAL DIRECTORS/OFFICERS

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

Tiny Kelly -President

Natalie Kelly - Secretary

Leon Keys - Board Member

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Veronica Lax

11331 Beacon Dr

Jacksonville, FL 32225

ARTICLE VII INCORPORATOR

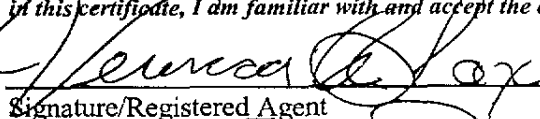
The name and address of the Incorporator is:

Raymond Rivers

512 Magnolia Street

Elizabeth City, NC 27909

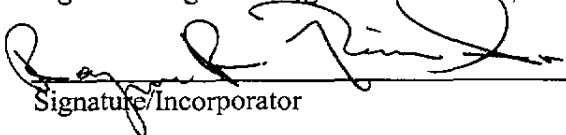
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent

5/5/03

Date



Signature/Incorporator

5/5/03

Date

FILED
03 MAY -6 PM 3:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA