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TRANSMITTAL LETTER

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

SUBJECT: St. Johns County Community Development Financial Inst., 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

\$122.50 Filing Fee

& Certified Copy

\$131.25

Filing Fee,

Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: Colleen Hardy

Name (Printed or typed)

6424 Power Point Circle

Address

Orlando, FL 32818

City, State & Zip

(407) 578-4554

Daytime Telephone number

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

ARTICLE OF INCORPORATION

The undersigned, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt (s) the following Article if Incorporation:

ARTICLE I - NAME

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The name of the corporation shall be:

St. Johns County Community Development Financial Institution, Inc.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 6424 Power Point Circle, Orlando, FL 32818

ARTICLE III - PURPOSE (S)

To provide financial assistance and support to low income, distress, underserved people and their communities for social and economical development as a Community Development Financial Entity in order to help and assist these poverty stricken communities to build self-esteem that will empower God's people to become self-sufficient and instill in them self-dignity, self motivation and self-worth in each target area.

ARTICLE IV - MANNER OF ELECTION OF DIRECTORS

On an annual basis by way of secret ballot as directed by the board.

ARTICLE V - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Colleen Hardy

6424 Power Point Circle

Orlando, FL 32818

ARTICLE VI - INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

Coleen Hardy

6424 Power Point Circle, Orlando, FL 32818

PRESIDENT - INCORPORATOR

A CHELLINE

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.