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(Requestor's Name)

(Address)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

TS  
2/26/03

## TRANSMITTAL LETTER

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

SUBJECT: Madison County Community Development Financial Institution, 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: Gerard Sapp  
Name (Printed or typed)  
925 IVEY LANE  
Address  
P.O. Box 680938  
Orlando, FL 32811  
City, State & Zip  
(407) 870-9254  
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 of Incorporation:

### ARTICLE I - NAME

The name of the corporation shall be:

Madison County Community Development Financial Institution, Inc.

### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation is:

P.O. Box 680738  
Orlando, FL 32868

### 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:

Gerard Sapp  
P.O. Box 680738, Orlando, FL 32868  
9255 IVEY LANE ORLANDO, FL 32811

### ARTICLE VI - INCORPORATOR

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

Gerard Sapp  
P.O. Box 680738, Orlando, FL 32868

[Signature]  
PRESIDENT, INCORPORATOR

7/24/03  
DATE

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.

[Signature]  
REGISTERING AGENT

7/26/03  
DATE

03 AUG 26 PM 2:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED