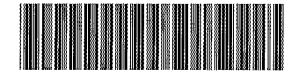
# 10300000736/

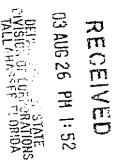
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
Decision Fally Name
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



50002233735
SECRETARY OF STATE AND ASSEE, FLORIDA

08/20/03--01058--031 \*\*78.75



## TRANSMITTAL LETTER

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

UBJECT: (Proposed corporate name - must include suffix)				
closed is an original a	nd one(I) copy of the artic	cles of incorporation and a	check for :	
S70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	
		· {		

FROM:	Earnestine Richardson				
	Name (Printed or typed)				
	925 ILEY LAKE P. 0. 11395				
	ORIANDO, 72.32811				
	City, State & Zip				
	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:

SECRETARY OF STAJE ALLAHASSEE, FLORDA

ARTICLE I - NAME

The name of the corporation shall be:

Collier County Community Development Financial Institution,

#### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: P. O. Box 11395
Tampa, FL 33680

#### 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.

The name and Florida st Earnestine Richard	rdeon	•	•	
P. O. Box 11395,	Tampa, FL	<del>33680</del>	-1 1	3381
P. O. BOX 11395, 925 TUEY	LAME	ORLAND	0, + 0	2001
ARTICLE VI. INCORE				

<u> ARTICLE V - INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

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

P. O. Box 11395, Tampa, FL 33680

Carnestine Richardson	08/22/03
PRESIDENT/INCORPORA TO	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.

Earnestine Richardson 08/22/03
REGISTERING AGENT DATE