

N03000007376

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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03 AUG 26 PM 3:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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03 AUG 26 PM 2:08  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

15/26/03

## TRANSMITTAL LETTER

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

**Orange County Community Development Financial Institution, Inc.**  
SUBJECT: \_\_\_\_\_  
(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: **Sharlene Thomas**

\_\_\_\_\_  
Name (Printed or typed)

**4049 Booker Street**

\_\_\_\_\_  
Address

**Orlando, FL 32811**

\_\_\_\_\_  
City, State & Zip

**(407) 247-7101**

\_\_\_\_\_  
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:

Orange County Community Development Financial Institution, Inc.

### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:  
4049 Booker Street  
Orlando, FL 32811

### 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:  
Sharlene Thomas  
4049 Booker Street, Orlando, FL 32811

### ARTICLE VI - INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:  
Sharlene Thomas  
4049 Booker Street, Orlando, FL 32811

Sharlene C. Thomas  
PRESIDENT/Incorporator

8/24/03  
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.*

Sharlene C. Thomas  
REGISTERING AGENT

8/24/03  
DATE

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 AUG 26 PM 3:18

FILED