

NO3000008835

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

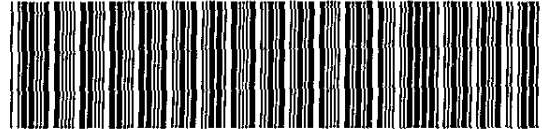
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03 OCT 10 PM 2:21
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: C5D, 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: Marvin Harvey
Name (Printed or typed)

927 Hoffner Avenue
Address

Orlando, Florida 32809
City, State & Zip

727-821-4819 X5100
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 28, 2003

MARVIN HARVEY
927 HOFFNER AVE
ORLANDO, FL 32809

SUBJECT: C5D, INC.
Ref. Number: W03000024627

RECEIVED
TALLAHASSEE
SEP 1 2003

03 OCT 19 AM 11:07

We have received your document for C5D, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White
Document Specialist
New Filings Section

Letter Number: 503A00048565

* I am submitting the corrections to the
articles of incorporation.

Thank you
Angelina Waller

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:
C5D, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
ORLANDO, 927 HOFFNER AVENUE, ORLANDO, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

C5D, Inc. is a not-for-profit foundation dedicated to the development of Character, Citizenship, Competency, Commitment, and Christianity through mentoring. The initial form of mentoring will be athletic training and promotions. This organization will endeavor to provide the financial resources, facilities, and administrative support to attract young adults to opportunities to enhance and apply their athletic skills, notably basketball.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors shall be elected for a term of three years or until a successor is elected. Prior to the annual meeting, the president shall appoint a nominating committee consisting of not less than three directors. For the purposes of the initial meeting, the steering committee shall propose a slate of directors to be voted on by the board officers. At all subsequent elections, all directors shall be elected for a term of three years.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Marvin Harvey, 927 Hoffner Avenue, Orlando, Florida 32809-President
Angelia Waller, 1931 2nd Street South, St. Petersburg, Florida 33705-Secretary/Treasurer
Paul Williamson, MD, 110 W. Underwood Street, Orlando, Florida 32809-Director

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

None Angelia Waller
1931 2nd St. South
St. Pete, FL 33705

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

None Angelia Waller
1931 2nd St. S.
St. Pete, FL 33705

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

Date

Signature/Incorporator

Date

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA