

**N04000006341**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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2004 JUN 23 P 12:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*  
*6/23/04*

## TRANSMITTAL LETTER

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

**SUBJECT:** SINGLE MOMS USA OF FLORIDA, 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:** JENNIFER E. BLANK  
Name (Printed or typed)  
  
1800 MAYPOP ROAD  
Address  
  
WEST PALM BEACH, FL 33415  
City, State & Zip  
  
(561)-818-1456  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S. (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be  
SINGLE MOMS USA OF FLORIDA, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be.  
1800 MAYPOP ROAD, WPB, FL 33415

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is  
THE PURPOSES INCLUDE BUT ARE NOT LIMITED TO PROVIDING SOCIAL AS  
WELL AS FINANCIAL ASSISTANCE TO SINGLE MOTHERS.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed  
AS PER COMPANY BYLAWS

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

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

JENNIFER BLANK 1800 MAYPOP RD., WPB, FL 33415 PRESIDENT  
STEPHANIE SARACO 1143 GOLDENROD RD., WELLINGTON, FL 33414 VICE PRESIDENT  
NEISA CASSILLAS 1338 DAB DR., SEFFNER, FL 33584 SECRETARY  
LYNN GOLDBERG 9529 FOX TROT LN., BOCA RATON, FL 33496 TREASURER

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

JENNIFER BLANK 1800 MAYPOP RD., WPB, FL 33415

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is.

JENNIFER BLANK 1800 MAYPOP ROAD, WPB, FL 33415

\*\*\*\*\*  
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

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TALLAHASSEE, FLORIDA