

NO4888808019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300039942143

08/16/04--01010--018 \*\*67.50

2004 AUG 15 PM 1:03  
STATIONER  
ATM

FILED

8-16-04

## TRANSMITTAL LETTER

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

SUBJECT: WIVES & MOTHERS AGAINST DRUGS, INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)  
(WMAAD, INC)

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: JACQUELYN HARRIS ADAMS  
Name (Printed or typed)

1337 LAMPLIGHTER WAY  
Address

ORLANDO, FLORIDA 32818  
City, State & Zip

407-927-2969  
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: WIVES & MOTHERS AGAINST DRUGS, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be: 1337 LAMPLIGHTER WAY  
ORLANDO, FLORIDA 32818

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO OFFER SUPPORT TO FAMILIES (WIVES & MOTHERS) WORKSHOPS, CONFERENCE  
CALLIES & SYMPOSIUMS

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

APPOINTED BY FOUNDER

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

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

JACQUELYN HARRIS ADAMS - FOUNDER - CEO

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

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

1337 LAMPLIGHTER WAY, ORLANDO, FLORIDA 32818  
Jacquelyn Harris Adams

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

1337 LAMPLIGHTER WAY, ORLANDO, FLORIDA 32818  
Jacquelyn Harris Adams

\*\*\*\*\*

*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  
2004 AUG 16 P 1:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA