

NO40000011823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

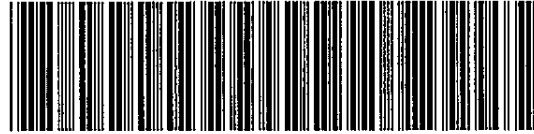
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/22/04--01028--002 **70.00

12/20/04--01054--012 **8.75

FILED
04 DEC 20 PM 4:18
TALLAHASSEE, FLORIDA

XSD
12-20

TRANSMITTAL LETTER

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

SUBJECT: Ladies of Avalon, 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

*↑ \$70 already
sent - \$8.75 check enclosed*

FROM: Deborah L. Heim

Name (Printed or typed)

3942 Cassia Dr.

Address

Orlando, FL 32828

City, State & Zip

407 380 7659

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:

Ladies of Avalon, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

13001 Founders Square Dr.
Orlando, FL 32828

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Our mission is to reach out to the women in the Avalon Park community through a social outlet in order to facilitate friendships and support.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:
voted by majority

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

President - Vivian Lack, 14331 Paradise Tree Dr., Orlando, FL 32828
Secretary - Patty Gullota, 14290 Tanja King Blvd., Orlando, FL 32828
Treasurer - Debby Heim, 3942 Cassia Dr., Orlando, FL 32828

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Vivian Lack, 14331 Paradise Tree Dr., Orlando, FL 32828

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
Debby Heim, 3942 Cassia Dr., Orlando, FL 32828

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.

Vivian Lack
Signature/Registered Agent

12/15/04
Date

Debby Heim
Signature/Incorporator

12/15/04
Date