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SECRETARY OF STATE

T I MO

02/11/05--01038--023 **78.75

TRANSMITTAL LETTER,

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

nunity Housing Network Inc.		
(PROPOSED CORPORATI	e name – <u>must inclui</u>	DE SUFFIX)
nd one(1) copy of the Article	les of Incorporation and a	a check for :
\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
Jucus	ADDITIONAL CO	
		N.A.
Jan Weeks		
Name (Pri	nted or typed)	_
5506 Merlyn Lane		
Ac	idress	
<u>-</u>		_
City, S	tate & Zip	
206 459 3393		_
	Jan Weeks Status Jan Weeks Name (Pri 5506 Merlyn Lane Ac Cape Coral Fl 3391 City, S	d one(1) copy of the Articles of Incorporation and a \$\frac{1}{2}\$78.75 \$\frac{1}{2}\$78.75 \$\frac{1}{2}\$19 \$\frac{1}{2}\$ \$\frac{1}{2}\$

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:		
Florida Community Housing Network Inc.	TAS 2	
ARTICLE II PRINCIPAL OFFICE	2005 FEB 1 1 SECRETARY ALLAHASSEI	
The principal place of business and mailing address of this corporation	shall be:	
5506 Merlyn Lane Cape Coral FI 33914	AR)	
	E	IT
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	LIS. T	
Teach Free Home Buyers Education Classes	I A II: 39 Y OF STATE EE, FLORIDA	
	5 -5	
ARTICLE IV MANNER OF ELECTION		
The manner in which the directors are elected or appointed:		
Appointed if they become necessary		
ARTICLE VI INITIAL REGISTERED AGENT AND STREET The name and Florida street address (P.O. Box NOT acceptable) or		
The name and Provide street address (P.O. Box NOT acceptable) of	i me registered agent is.	
Jan Weeks 5506 Merlyn Lane Cape Coral FI 33914		
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is:		
Jan Weeks 5506 Merlyn Lane Cape Coral Fl 33914		
**********	********	**
Having been named as registered agent to accept service of process for the abo in this certificate, I am familiar with and accept the appointment as registered		ated
Exan Weeks	2/8/05	
Signature/Registered Agent	Date	

Signature/Incorporator