

**N050000006113**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

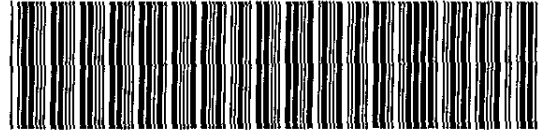
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
05 JUN 14 AM 9:43

MRB  
6/14

## TRANSMITTAL LETTER

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

**SUBJECT:** James A. Russell Fund, 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:** Jean G. Hinton  
Name (Printed or typed)

2105 Palmer Street  
Address

Orlando, FL 32803  
City, State & Zip

407-849-0300  
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)

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TALLAHASSEE, FLORIDA

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**ARTICLE I NAME**

The name of the corporation shall be:

James A. Russell Fund, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

2714 Dahlonaga Drive  
Jacksonville, FL 32224

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

My son, James A. Russell has cerebral palsy. We have arranged through other non-profit organizations to hold benefits, such as garage sales, barbecues, raffles, in order to raise funds for James to partake in special therapy treatments abroad and now in the United States. I would like to open a corporation for him and others so we may purchase therapy treatment and equipment.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

By appointment of the President and Vice-President.

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

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

Lisa R. Russell - President, Treasurer, Director  
William L. Russell, III -- Vice-President, Secretary, Director

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

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

Jean G. Hinton  
2105 Palmer Street  
Orlando, FL 32803

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Lisa R. Russell  
2714 Dahlonaga Drive  
Jacksonville, FL 32224

\*\*\*\*\*

*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

6-4-05  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

6/4/05  
\_\_\_\_\_  
Date