N05000006334

(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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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 JUN 20 AM 8:14

D Brown JUN 21 2005

TRANSMITTAL LETTER

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

SUBJECT: FARRELL SIMON FOUNDATION INCORPORATED
(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: FARRELL SIMON
Name (Printed or typed)

5222 NORTH SPRINGS WAY
Address

CORAL SPRINGS, FL 33076
City, State & Zip

954-288-8455
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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ARTICLE I NAME

The name of the corporation shall be:

FARRELL SIMON FOUNDATION INCORPORATED

ARTICLE II PRINCIPAL OFFICE

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

5222 NORTH SPRINGS WAY
CORAL SPRINGS, FL 33076

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To create a charitable organization through which scholarships for University Students will be dispersed on a yearly basis.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors will be appointed by the President.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

FARRELL SIMON 5222 NORTH SPRINGS WAY, CORAL SPRINGS, FL 33076 (Director ~~President~~)
HARVEY SIMON 5222 NORTH SPRINGS WAY, CORAL SPRINGS FL 33076 (Director)
CATHY SIMON 5222 NORTH SPRINGS WAY, CORAL SPRINGS FL 33076 (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:

FARRELL SIMON
5222 NORTH SPRINGS WAY
CORAL SPRINGS, FL 33076

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

FARRELL SIMON
5222 NORTH SPRINGS WAY
CORAL SPRINGS, FL 33076

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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: 6/14/05

Signature/Incorporator — Date: 6/14/05