

N95000012897

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2005 DEC 23 A 9:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12-28-05
12/28/05

COVER LETTER

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

SUBJECT: NO TROUBLE CHILDREN'S CHARITY
(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: AMBER SAMPLE
Name (Printed or typed)

50-84TH AVENUE
Address

TREASURE ISLAND, FL. 33706
City, State & Zip

727-368-1333
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:

NOTROUBLE CHILDREN'S CHARITY INC.

ARTICLE II PRINCIPAL OFFICE

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

50-84TH AVENUE, TREASURE ISLAND, FL 33706

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROVIDE EDUCATION ABOUT CONSERVATION TO YOUTH VIA FISHING SEMINARS AND CHARTERS WITH LOCAL LAW ENFORCEMENT.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

APPOINTED (SEE MISSION STATEMENT)

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

- SAME ADDRESS

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

AMBER SAMPLE, PRESIDENT, SECY, TREASURER
STEFAN LAKOLINSKI, VICE PRESIDENT

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

AMBER SAMPLE
50-84TH AVENUE
TREASURE ISLAND, FL 33706

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

STEFAN LAKOLINSKI
50-84TH AVENUE
TREASURE ISLAND, FL 33706

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

12-18-05
Date



Signature/Incorporator

12-18-05
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 DEC 23 A 4:59

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