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(Requestor	's Name)			
(Address)				
(Address)				
(City/State/	Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business I	Entity Name)			
(Document	Number)			
Certified Copies C	ertificates of Status			
Special Instructions to Filing Officer:				
Offic	e Use Only			



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SLUKETARY OF STATE

ATT ALARCSEE EL POIDA

COVER LETTER

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

Tananassee, FL 525	2 T		
SUBJECT: Fund	for Teofipol (Tschon), in (PROPOSED CORPORATE	nc. Ename – <u>Must Inclu</u>	DE SUFFIX)
			\
Enclosed is an origin	al and one(1) copy of the Article	es of Incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	✓ \$87.50Filing Fee,Certified Copy& Certificate
	-	ADDITIONAL CO	PY REQUIRED
FRO	M: Louis Horowitz		
	Name (Prin	ted or typed)	-
801 NW 79 Terrace Address		-	
Plantation, Fl. 33324 City, State & Zip		-	
	(954) 473-2988	mhone number	_
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:

Fund for Teofipol (Tschon), Inc.

ARTICLE II PRINCIPAL OFFICE

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

801 NW 79 Terrace, Plantation Fl. 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To restore and maintain the Jewish Cemetery and monument to the 2000 Jews slain by the Nazis during World War II located in Teofipol, Ukraine, and to support the memory of the Jews who lived in the Teofipol District.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The Directors was chosen by the incorporator Louis Horowitz.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Louis Horowitz, Acting President and Treasurer

Paula Carr, Acting Vice-President, 684 W. Tropical Way, Plantation Fl. 33317

Ira Horowitz, Acting Secretary, 465 NE 55 Terrace, Miami Fl. 33137

Amanda Horowitz, Director, 161 Turkey Hill Road, Florence, Ma. 01062

Jacquelyn Carr, Director, 684 W. Tropical Way, Plantation Fi. 33317

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Louis Horowitz, 801 NW 79 Terrace, Plantation Fl. 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Louis Horowitz, 801 NW 79 Terrace, Plantation, FI 33324

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

Signature/Incorporator

Date