## NO 6000001085

(Requestor's Name)
(Address)
(Address)
( lauross)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Submoss Emily Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
openia, were an analysis of thing of the series of

Office Use Only



500064632645

01/30/06--01009 -002 ++70.75

STAN 30 PM 2: 09

## **COVER LETTER**

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

Enclosed is an original	and one(1) copy of the Arti	cles 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 CO	PY REQUIRED			
FROM: Lorentine Richardson  Name (Printed or typed)  172 Osprey Heights Drive Address  Winder Haven Fl 23880  City, State & Zip  Play-6516167  Daytime Telephone number				TATE BACSEF FLORES	06 JAN 30 PM 2: 09	FILED

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:		
Server and Family Resource center	er, Inc.	
ARTICLE II PRINCIPAL OFFICE		
The principal place of business and mailing address of this corporation	on shall be:	
Winter Haven, Florida - Polk County	<b>.</b>	
172 Osprey Heights Drive - Winter Ha	ven, Al 33880	
ARTICLE III PURPOSE		
The purpose for which the corporation is organized is:	te and maintain)	Communit
candifamily eservice center for the bene	it is minor to the	,
low in one chamilton to wide and	And the state of t	rand
to achieve ratters and maintain is	tales	s candisen
and other financial rand other related in	reportugition life with	2 Coursele
ARTICLE IV MANNER OF ELECTION	tion and intablination	ma widin
Low income Gamilias. To wride rand to achieve, rattern and maintain a wand other francial rand other related our ARTICLE IV MANNER OF ELECTION in behalifitate The manner in which the directors are elected or appointed:  By plurality vote for a term of on	e uplar and	nousehoud
by majority wate thereafter.	<b>Q</b>	
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS	}	
List name(s), address(es) and specific title(s):	•	
Okaymwalker o Adrian wormley	® Comba	
P.O. BOY 3615 900 DREXE   AVE, NE	D carelo Laureencea	مد
Writer Haven 17 33885 Winter Haven 1723881	150 Avenue T, no	<u>.</u>
	Winter Hoven, FT =	5×00 h
Board of directors as afrow	_	-2440
ARTICLE VI INITIAL REGISTERED AGENT AND STR	EET ADDRESS	ਨੂੰ ੋਂ <b>8</b>
The name and Florida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Lorenine Richardson		
172 Ospred Hights Drive		⊅ -:> ¬
Winter Howen, F1 33880	į,	
ARTICLE VII INCORPORATOR		η <sup>τη</sup> — Ε
The name and address of the Incorporator is:		22 %
Lokerine Richardson	-	<b>.</b> 139
172 Osprey Heights DRIVE	•	>
Winter Howen, FT 33880		
*******	**********	(本本本
Having been named as registered agent to accept service of process for the a		
in this certificate, I am familiar with and accept the appointment as registere	a agent and agree to act in this capacity.	•
Dorraine Richardson	11/22/05	
2. 10	Date	-
Signature/Registered Agent	11 22 05 Date	
Lake a location dia	11/22/20	
Giran yacharasan	111 201 05	-
Signature/Incorporator	Date	