

NO6000016113

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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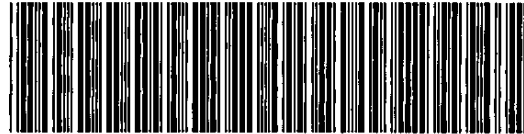
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers SEP 27 2006

## COVER LETTER

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

SUBJECT: Emergency Housing, 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: Tracey A. Spencer  
Name (Printed or typed)

1708 W 14th Street  
Address

Jacksonville, Florida, 32209  
City, State & Zip

904-234-9570 or 904-356-2615  
Daytime Telephone number

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TALLAHASSEE, FLORIDA

**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:

Emergency Housing, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

1708 W 14 th Street, Jacksonville, Florida, 32209

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide short and long term emergency housing needs for individuals living with HIV / AIDS and other disabilities.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Directors of the corporation will be elected annually by the Board of Directors at its annual meeting.

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

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

Tracey A. Spencer, 1708 W 14th Street, Jacksonville, Florida, 32209, President

Warren L. Spencer, 1708 W 14th Street, Jacksonville, Florida, 32209, Vice-President

Thomas J. Spencer, 4620 Castlewood Dr. W, Jacksonville, Florida, 32206, Secretary/Treasurer

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

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

Tracey A. Spencer, 1708 W 14th Street, Jacksonville, Florida, 32209

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Tracey A. Spencer, 1708 W 14th Street, Jacksonville, Florida, 32209

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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.*

Tracey A. Spencer  
Signature/Registered Agent

September 25, 2006  
Date

Tracey A. Spencer  
Signature/Incorporator

September 25, 2006  
Date