

N07000004731

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

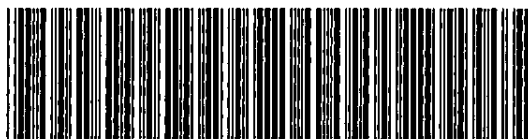
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT:

Demetria C. Patterson Foundation
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)
Non-Profit Corporation

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:

DEMETRIA C. PATTERSON
Name (Printed or typed)

P.O. Box 1323
Address

NEW Smyrna Beach, FL 32120
City, State & Zip

386-689-9694
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 4, 2007

DEMETRICIA C. PATTERSON
P.O. BOX 1323
NEW SMYRNA BEACH, FL 32170

SUBJECT: DEMETRICIA C. PATTERSON FOUNDATION NON-PROFIT
CORPORATION
Ref. Number: W07000021607

We have received your document for DEMETRICIA C. PATTERSON
FOUNDATION NON-PROFIT CORPORATION. However, the document has not
been filed and is being returned for the following:

Florida law requires the street address of the principal office and, if different the
mailing address of the entity. A post office box is not acceptable for the principal
office.

Please return the original and one copy of your document, along with a copy of
this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call
(850) 245-6934.

Loria Poole
Document Specialist
New Filing Section

Letter Number: 607A00031451

ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

Demetria C. Patterson Foundation, No Profit

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 1323, New Smyrna Beach, FL 32170
103 Sea Street, New Smyrna Beach, Florida 32168.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*Non Profit Assistance Program for Senior Citizen
Drug Assistance pay, to help buy their medications*

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

*No directors at this time, when that time comes
by the President of the Foundation, Demetria Patterson*

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Arthur L. Johnson Jr. - Officer, + DEMETRIA C. Patterson
103 Sea St. 103 SEA ST
NEW Smyrna Beach, FL 32168 NEW Smyrna Beach,
FL 32168

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

DEMETRIA C. Patterson, President
103 SEA Street, NEW Smyrna Beach, FL 32168

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Arthur L. Johnson, Jr. 103 Sea Street
New Smyrna Beach, FL 32168

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.

Demetria C. Patterson

Signature/Registered Agent *DEMETRIA C. PATTERSON*

4/10/07
Date

Arthur L. Johnson, Jr.

Signature/Incorporator *ARTHUR L. JOHNSON, JR.*

4/10/07
Date