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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(business Entity Name)	
(Document Number)	
(Boodinon Hambol)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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2007 MAY 16 AM 8: 22
SECRETARY OF STATE

18-18

COVER LETTER

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

SUBJECT: Travis Washington Beginning of A new life fund, Inc

Enclosed is an original a	and one(1) copy of the Artic	les 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	
		ÁDDITIONAL CO	PY REQUIRED	
AMBAR				
FROM: Shirley Ambrister Name (Printed or typed)				
1400 W 33rd Street				
Rivery Beach F1 33404				
	501-50 Daytime Te	6-3351	_	

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

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

The name of the corporation shall be:
Travis Washington Beginning of a new life Fund Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
1400 W 33rd Street
Riviera Beach FI 33404 ARTICLE III PURPOSE
The purpose for which the corporation is organized is: To Accept funds so my son could have A
bone Marrow Transplant //aharitable organization)
bone Marrow Transplant (Charitable organization) ARTICLE IV MANNER OF ELECTION Transportation Travel expenses for Fam The manner in which the directors are elected or appointed:
The manner in which the directors are elected or appointed: (PArent of Minor Child)
As stated in the bylaws
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS
Shirley Ambrister - 1400 W 33rd Street
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Shirky Ambrisher 1400 w 33rd street 33486 6 Riukra Beach F1 33486 6
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Shirky Ambrister 1400 w 33rd Street 37
Shirley Ambrister 1400 w 33rd street 3 7
ARTICLE VII INCORPORATOR
The name and address of the Incompetants.
Shirley Ambrister-1400 W 33rd Street Riviera Beach F1, 3340 F

n this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.
Signature/Registered Agent Date
This Doub And Asidon 5-14-07
Signature/Incorporator Date