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(Requestor's Name)			
(Address)			
(Address) **	<u>*</u>		
(City/State/Zip/Phone #)				
PICK-UP	₩ wait	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE

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COVER LETTER

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

SUBJECT: Springfield Mommies Group, Inc					
	(PROPOSED CORPORATE				
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate		
FROM:	1916 N. Pearl St.	ited or typed) dress			
Jacksonville, FL 32206 City, State & Zip					

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

Daytime Telephone number

904-994-2481

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit) TAILAHASSEE, FLORIDA

ARTICLE	I	NAME
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The name of the corporation shall be:

Springfield Mommies Group, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1321 N. Main Street Jacksonville, FL 32206

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide support and social activities to families located in Springfield, a Historic District within the Jacksonville city limits.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Nominated and elected annually in December

as stated in the by-laws

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

2007 pres.: Cindy Berszenyi: 24 East 4th Street, Jacksonville, FL 32206

VP: Wendy Thomas: 1440 N. Pearl St., Jacksonville, FL 32206

sec.: Maureen Lawrence: 1405 Boulevard, Jacksonville, FL 32206

tres.: Jodi Miles: 1916 N. Pearl St., Jacksonville, FL 32206

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Tabitha Galbreath 1919 N. Laura Street Jacksonville, FL 32206

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jodi A. Miles

1916 N. Pearl St.

Jacksonville, FL 32206

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. gnature/Registered Agent

Signature/Incorporator