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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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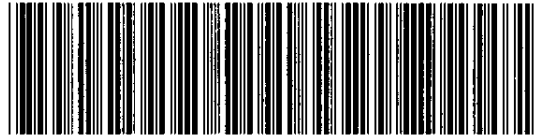
(Business Entity Name)

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2008 APR 14 AM 10:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers APR 14 2008

COVER LETTER

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

SUBJECT: FUND-RAISE A FAMILY FOUNDATION, 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: Christina Lawson
Name (Printed or typed)

3148 Chessington Drive
Address

Land O'Lakes, FL 34638
City, State & Zip

(813) 294-1823
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:

Fund-Raise A Family Foundation, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

3148 Chessington Drive
Land O'Lakes, FL 34638

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To assist couples in raising funds to pay for adoption costs.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

2/3 vote

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Christina Lawson, President
Bernadette Cigarran, Vice President
Belinda Scaglione, Director of Marketing

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Christina Lawson
3148 Chessington Drive
Land O'Lakes, FL 34683

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Christina Lawson
3148 Chessington Drive
Land O'Lakes, FL 34683

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.

Christina Lawson

Signature/Registered Agent

4/7/08

Date

Christina Lawson

Signature/Incorporator

4/7/08

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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