

N08000006659

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

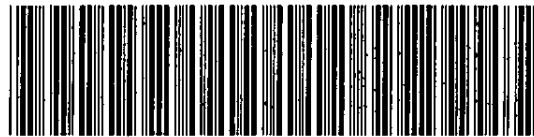
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer: *Per Monique
W: Long conversation it was ok
to correct Article V to list the
member as Trustee. ALSO Article
I to add the SUFFIX Inc.*

7/15/08

Office Use Only



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07/14/08--01062--001 **87.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL 14 PM 4:25

EP 7/15/08

COVER LETTER

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

SUBJECT: Community Health Initiative Programs
(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: Monique W. Long
Name (Printed or typed)

2210 S. Rio Grande Avenue
Address

Orlando, Florida 32805
City, State & Zip

(407) 425-3001 ext. 10
Daytime Telephone number

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:

Community Health Initiatives Programs, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2210 S. Rio Grande Avenue
Orlando, Florida 32805

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Raise awareness to prevent disease as well as promote overall health and wellness within the community.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

According to the bylaws

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

President-Monique W. Long - 2210 S. Rio Grande Ave., Orlando, FL 32805

Secretary-Lynette Knight -3034 Clubview Dr., Orlando, FL 32811

Treasurer-John Butler - 9427 Raven Dell St., Orlando, FL 32825

Trustee Member-Dr. Richard Anderson, Jr. - 4434 Lake Calabay Dr., Orlando, FL 32837

Trustee Member-Rosalyn Dunlap - P.O. Box 616705, Orlando, FL 32861

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Monique W. Long
2210 S. Rio Grande Avenue
Orlando, Florida 32805

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LaVon W. Bracy
5315 Woodstead Way
Orlando, Florida 32819

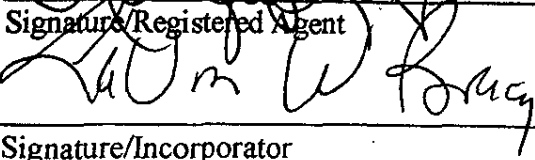
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent

7-8-08

Date



Signature/Incorporator

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL 14 PM 4:25