

ND8000009863

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

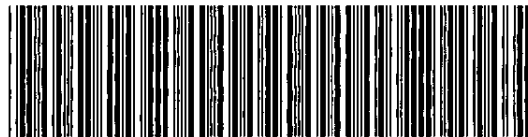
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900136925969

10/21/08--01028--001 **78.75

FILED

2008 OCT 24 P 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 24 2008
D.A. WHITE

COVER LETTER

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

SUBJECT: _____

Autism Blessings, 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: _____

Patricia Myers

Name (Printed or typed)

6970 Mapperton Dr

Address

Windermere, FL 34786

City, State & Zip

407-731-2803

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 22, 2008

PATRICIA MYERS
6970 MAPPERTON DR
WINDERMERE, FL 34786

SUBJECT: AUTISM BLESSINGS, LLC
Ref. Number: W08000048530

We have received your document for AUTISM BLESSINGS, LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please remove LLC and LIMITED LIABILITY COMPANY everywhere it appears in the document, as per our telephone conversation.

An effective date may be added to the Articles of Incorporation **if a 2009 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return the corrected 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) 245-6933.

Dale White
Regulatory Specialist II
New Filing Section

Letter Number: 208A00054671

October 15, 2008

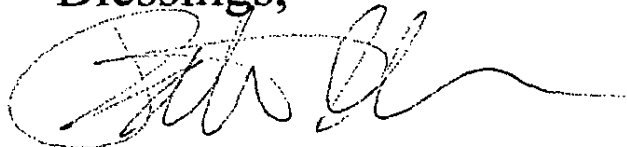
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Autism Blessings, Non-Profit

Division of Corporations,

I own Autism is a Blessing, LLC and would like to also create another company but it will be a non-profit. The name will be similar: Autism Blessings. Please allow me to incorporate this non-profit Autism Blessings. If you have any questions, please call me 407-731-2803. Thank you for your help.

Blessings,



Patricia A. Myers

President

Autism is a Blessing, LLC

autismblessings@aol.com

10-22-08
Dale -
here is the
corrected paperwork
Thank you.

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

FILED

2008 OCT 24 P 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

The name of the Non-Profit Company is:
Autism Blessings, Inc.

ARTICLE II

The street address of the principal office of the Non-Profit Company is:
6970 Mapperton Drive
Windermere, FL 34786

ARTICLE III

The purpose for which this Non-Profit Company is:
To service the disability community and advocate for individuals with disabilities. This will include any and all lawful business.

ARTICLE IV

The manner in which the directors are elected or appointed:
The directors will be elected and appointed by the Board. The final decision maker on all appointment of any new directors will be at the discretion of the President of this Non-Profit.

ARTICLE V

Patricia Ann Myers - President
6970 Mapperton Drive
Windermere, FL 34786

Joe Anthony Myers - Vice President
6970 Mapperton Drive
Windermere, FL 34786

ARTICLE VI

Initial registered agent:
Patricia A. Myers
6970 Mapperton Drive
Windermere, FL 34786

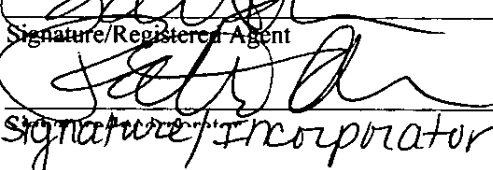
ARTICLE VII

The incorporator:
Patricia A. Myers
6970 Mapperton Drive
Windermere, FL 34786

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 agree to act in this capacity.



Signature/Registered Agent



Signature/Incorporator



Date



Date