

NO80000/0951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

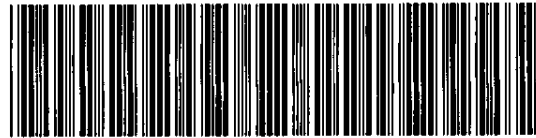
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/04/08--01015--019 **87.50

RECEIVED
08 DEC -4 PM 12:04
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 DEC -4 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
12/4

COVER LETTER

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

SUBJECT: Heart Gallery North Florida, 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: D. Christine Thurman
Name (Printed or typed)

217 N. Franklin Blvd.
Address

Tallahassee, FL 32301
City, State & Zip

(850) 222-0052
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:

Heart Gallery North Florida, Inc.

ARTICLE II PRINCIPAL OFFICE

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

525 N. Martin Luther King Blvd.
Tallahassee, FL 32301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Heart Gallery North Florida, Inc. (HGNF) is a charitable organization whose purpose is to assist staff and agencies in the recruitment of adoptive families for foster children who are legally free for adoption and who are in need of permanent, loving and stable families. HGNF will serve 12 counties across North Florida.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Appointed

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Sherri Croom, President
2112 Evergreen Drive
Tallahassee, FL 32303

Jackie Barksdale, VP for Circuit 2
1333 Lawndale Road
Tallahassee, FL 32317

Kathy Donofro, VP for Circuit 14
910 Harrison Avenue
Panama City, FL 32401

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

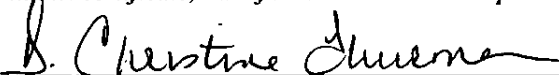
Christine Thurman, Attorney
217 N. Franklin Blvd.
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sherri Croom, President
2112 Evergreen Drive, Tallahassee, FL 32303

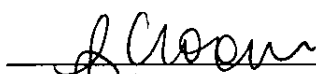
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent

12-04-08

Date



Signature/Incorporator

12-01-08

Date

FILED

08 DEC -4 PM 12:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA