

NO9000008270

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

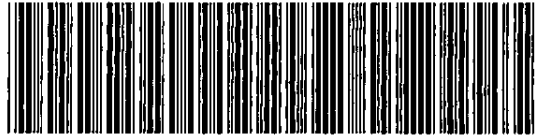
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 24 2009  
D. A. WHITE

## COVER LETTER

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

SUBJECT: The Comfort Zone 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: Mr. Colin Bullock  
Name (Printed or typed)

1831 NW 185th Street  
Address

Miami, Florida 33056  
City, State & Zip

(786) 355-1526  
Daytime Telephone number

colinbullock1962@yahoo.com  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

09 AUG 21 PM 12:55  
DIVISION OF CORPORATION

August 6, 2009

MR. COLIN BULLOCK  
1831 NW 185TH ST  
MIAMI, FL 33056

SUBJECT: THE COMFORT ZONE INC.  
Ref. Number: W09000035786

We have received your document for THE COMFORT ZONE INC. and your check(s) totaling \$79.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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: 009A00026965

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

**ARTICLE I NAME**

The name of the corporation shall be:  
The Comfort Zone Unlimited Inc.

**FILED**

**ARTICLE II PRINCIPAL OFFICE**

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

45 East Sheridan Street  
Dania Beach, FL 33004-4352

Mailing Address: 1831 NW 185th Street  
Miami, FL 33056

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose of the non-profit corporation is to unleash the positive energy of low-income children, adolescents and adults to rebuild their communities and their own lives with a commitment to education, work, responsibility, and family. The Comfort Zone Unlimited community-based program will develop programs to assist individuals to accomplish these goals.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Directors were appointed to their respective positions through an election process.

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

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

Mr. Colin Bullock, President & Treasurer, 1831 NW 185th Street, Miami, Florida 33056  
Mr. Dave Rowe, Vice President, 630 NW 214th Street, Miami, FL 33169  
Mrs. Audrey Bullock, Secretary, 900 NE 209 Terrace, Miami, FL 33179

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

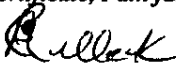
Mr. Colin Bullock  
1831 NW 185th Street, Miami, Florida 33056

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Mr. Colin Billock  
1831 NW 185th Street, Miami, Florida 33056

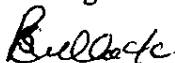
\*\*\*\*\*  
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*



\_\_\_\_\_  
Signature/Registered Agent

08/17/09

\_\_\_\_\_  
Date



\_\_\_\_\_  
Signature/Incorporator

08/17/09

\_\_\_\_\_  
Date