

N 09000009145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

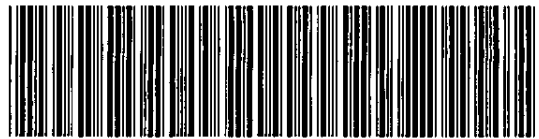
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Special Instructions to Filing Officer:

W09-38046

Office Use Only



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08/21/09--01025--007 \*\*78.75

FILED

2009 SEP 17 PM 4: 38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch SEP 21 2009

## COVER LETTER

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

SUBJECT: Southern Thrift Incorporated  
(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: Samuel Lee  
Name (Printed or typed)

4301 34th St. S  
Address

St. Petersburg, FL 33711  
City, State & Zip

813 504-6660  
Daytime Telephone number

high5tp@yahoo.com  
E-mail address: (to be used for future annual report notification)

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



RECEIVED  
DEPARTMENT OF STATE

09 SEP -8 AM 11:33

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 24, 2009

SAMUEL LEE  
4301 34TH ST S  
ST PETERSBURG, FL 33711

SUBJECT: SOUTHERN THRIFT INCORPORATED  
Ref. Number: W09000038046

We have received your document for SOUTHERN THRIFT INCORPORATED 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 Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 245-6928.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 809A00028505



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

09 SEP 17 AM 11: 05

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

September 10, 2009

SAMUEL LEE  
4301 34TH ST S  
ST PETERSBURG, FL 33711

SUBJECT: SOUTHERN THRIFT INCORPORATED  
Ref. Number: W09000038046

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

You failed to make the correction(s) requested in our previous letter.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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) 245-6928.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 909A00029942

**ARTICLES OF INCORPORATION**

In Compliance with Chapter 617, F.S., (Not for Profit) **FILED**

2009 SEP 17 PM 4:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:  
Southern Thrift Incorporated

**ARTICLE II PRINCIPAL OFFICE**

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

Same 4301 34th St. South  
ST. PETERSBURG FL 33711

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Raise fund to help minority church organizations and youth programs

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Election by board members

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

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

Samuel Lee - 16602 sounding shores dr. Initial Director and Officer  
Odessa, FL 33556

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

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

Samuel Lee - 16602 sounding shores dr. Odessa, FL 33556

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

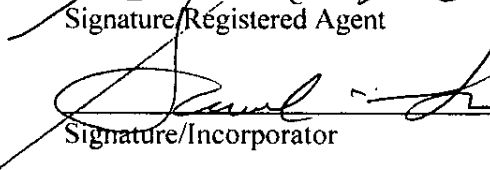
Samuel Lee - 16602 sounding shores dr. Odessa, FL 33556

\*\*\*\*\*

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

  
Date

  
Signature/Incorporator

  
Date