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| PICK-UP WAIT MAIL | - |
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| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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COVER LETTER

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

| SUBJECT: | AMERICAN | LEGION AUXIL | IARY, L | AKE | HELEN-CASSADAGA I | UNIT 127 INC | |
|---------------|---------------|---------------------------------------|--------------------------|----------|---------------------------------------|--|-----|
| pedaner. | | (PROPOSED C | ORPOR/ | ATE N | AME – <u>MUST INCLU</u> | DE SUFFIX) | |
| Enclosed is a | n original ar | nd one(1) copy of | f the Art | icles | of Incorporation and | a check for : | |
| S7 Filing | | \$78.75 Filing Fee Certificate Status | | | □\$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate | y. |
| | | | ADDITIONAL COPY REQUIRED | | | | |
| | | | | L | · · · · · · · · · · · · · · · · · · · | | |
| | FROM: | MARY ROBERT | | (Printe | d or typed) | <u> </u> | 200 |

474 W CRAIG AVE

386-345-0833

LAKE HELEN FL 32744

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

Address

City, State & Zip

Daytime Telephone number

AMERICAN LEGION AUXILIARY, LAKE HELEN - CASSADAGA UNIT 127, INC.

Articles of Incorporation of the undersigned, civilian organization of women citizens of the United States, desiring to form a Non-Profit Corporation under the Non-Profit Corporation Law of Florida, do hereby certify:

FIRST: The name of the Corporation shall be American Legion Auxiliary, Lake Helen – Cassadaga Unit 127, Inc.

SECOND: The place in this state where the principal office of the Corporation is to be located is 109 Cassadaga Rd, Lake Helen FL 32744 in Volusia County.

THIRD: Said Corporation is organized exclusively for charitable and educational purposes, to participate and contribute to the accomplishments of the aims and purposes of the American Legion; to inculcate a sense of individual obligation to the community, including for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501 © (3) of the Internal Revenue Code; or the corresponding section of any future federal tax code.

FOURTH: The names, title and address of the persons who are the Initial Directors and/or Officers of the corporation are as follows:

Patricia Jean Shutts, President – 1082 Wisconsin Ave, Orange City FL 32763 Ann Baker, Secretary – 8 Park St, Lake Helen FL 32744 Mary Roberts, Treasurer – 474 W Craig Ave, Lake Helen FL 32744

These Directors/Officers of the American Legion Auxiliary, Lake Helen – Cassadaga Unit 127, Inc. are elected as stated and in accordance with the bylaws of this Corporation.

FIFTH: No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distribution in furtherance of the purposes set forth in the Third Article hereof. Said corporation shall be absolutely non-political and shall not be used for the dissemination of partisan principles nor for the promotion of the candidacy of any person seeking public office or preferment. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501 (c) (3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

SIXTH:

The Initial Registered Agent of this Corporation shall be:

Mary Roberts – 474 W Craig Ave, Lake Helen FL 32744

SEVENTH:

The Incorporator of this Corporation is:

Patricia Jean Shutts - 1082 Wisconsin Ave, Orange City FL 32763

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

Oct. 14, 2009

Date

Signature/Incorporator

Date

MTIT'S GNATURE GUARANTEED EXAMIN EDALLION GUARANTEED BANK OF AMERICA, N.A.

(FL1797) AUTHORIZED SIGNATURE X 9 0 0 4 9 5 7 SECURITIES TRANSFER AGENTS MEDALLION PROGRAM

SECRETARY OF STATE
DIVISION OF CORPORATION

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