

N/0000005030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

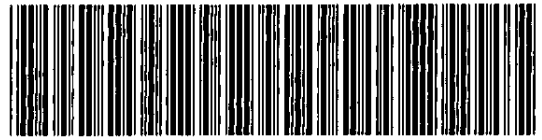
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200178714902

Debit
Memo# 05703-C

04/30/10--01018--007 **78.75

05/20/10--01004--009 **93.75

FILED
10 MAY 20 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SP 5/21/10

W/00000 21412



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 13, 2010

BIG HEARTS HOMELESS SHELTER INC.
1136 SE PROCTOR LANE
PORT SAINT LUCIE, FL 34983

Ref. Number: W0000021412

Memo #: 05703-C

This letter is to inform you that your check number 572 for \$78.75, which was dated April 27, 2010 and submitted for has been returned to us by your bank because of NONSUFFICIENT FUNDS.

We are notifying you because our records indicate that the paperwork for has not been filed and was returned to you because of deficiencies in the document. If you send the document back to us to be filed, be sure to enclose a cashier's check or money order in the amount of \$93.75, as we cannot take credit card information over the phone. This will cover the unpaid check and also the service fee required by law under section 215.34, Florida Statutes.

When sending the cashier's check or money order, please indicate that it is a replacement for the returned check mentioned above. Also, please include in your response the Debit Memo number given above. Send your response to:

Division of Corporation
Attn: E. PETERSON
P.O. Box 6327
Tallahassee, FL 32314

If you have any questions you may contact me at (850) 245-6900.

Melinda Lilliston
Administrative Assistant
Bureau of Commercial Recording

RECEIVED
10 MAY 20 AM 10:52
BUREAU OF COMMERCIAL RECORDING
TALLAHASSEE, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 4, 2010

JONATHAN & CHUDNEY MCCLINTON
1136 SE PROCTOR LANE
PORT SAINT LUCIE, FL 34983

SUBJECT: BIG HEARTS HOMELESS SHELTER INC.
Ref. Number: W10000021412

We have received your document for BIG HEARTS HOMELESS SHELTER INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Only one Registered Agent must be listed.

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) 245-6062.

Eula Peterson
Regulatory Specialist II
New Filing Section

Letter Number: 110A00010985

COVER LETTER

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

SUBJECT: Big Hearts Homeless Shelter 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: Jonathan & Chudney McClinton
Name (Printed or typed)

1136 SE Proctor Lane
Address

Port Saint Lucie FL 34983
City, State & Zip

772-879-2216
Daytime Telephone number

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

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:

Big Hearts Homeless Shelter Inc.

ARTICLE II PRINCIPAL OFFICE

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

1136 SE Proctor Lane Port Saint Lucie FL 34983

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

"BIG HEARTS" mission is to provide training, outreach, housing, and referral services to homeless veterans.

To provide occupational assistance for disadvantaged veterans through vocational and educational training, and improving personal appearance, interviewing and technical skills to ensure homeless veterans will have access to high quality employment opportunities

To provide educational activities related to the health and general welfare of the homeless veteran's community

To coordinate with other veteran service providers to maximize the positive impact on the general veteran's community in Saint Lucie County FL and across our Nation.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

All Directors shall be elected at each Annual Meeting, to hold office until the next Annual Meeting; however, if any such Director(s) are not elected at any Annual Meeting, they shall be appointed by the Board of Directors to serve the duration for the terms until the next Annual Meeting. Each such Director, including a Director appointed to fill a vacancy, shall hold office until expiration of term for which elected and until a successor has been selected and qualified.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Jonathan McClinton 1136 SE Proctor Lane Port Saint Lucie FL34983(President)

Chudney McClinton 1136 SE Proctor Lena Port Saint Lucie FL 34983(Vice President/Treasurer)

Jamal Payne 1750 N Congress Ave West Palm Beach FL 33401(Secretary)

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Chudney McClinton 1136SE Proctor Lane Port Saint Lucie FL 34983

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Chudney McClinton 1136 SE Proctor Lane Port Saint Lucie FL 34983

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.

Chudney McClinton
Signature Registered Agent

Chudney McClinton
Signature Incorporator

May 11 2010
Date

May 11 2010
Date

FILED
10 MAY 20 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA