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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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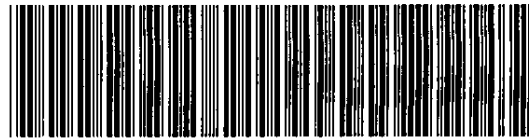
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/15/10--01012--004 **78.75

APPROVED
AND
FILED

10 JUL 15 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PS
7/20/10

COVER LETTER

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

SUBJECT: The Mentoring Partnership of Palm Beach County, 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: Rosella Edwards
Name (Printed or typed)

4200 Community Dr #2415
Address

West Palm Beach, FL 33409
City, State & Zip

561-880-7686
Daytime Telephone number

rosella0607@att.net
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:

The Mentoring Partnership of Palm Beach County, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4200 Community Dr #2415, West Palm Beach, FL 33409

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide optimum services to youth ages 7-17 at risk of delinquency and/or failing to become successful in life due to underlying circumstances to include low income/single-parent home/developmental delays/learning disabilities/gang affiliation/incarcerated parent and the like.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The directors will serve a life sentence in the office of which he/she is individually appointed.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Rosella Simmons- Executive Director
Temeka Greene-Moore/Administrator
Georgia Ann Simmons-Treasurer

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Temeka Greene-Moore
8831 Okeechobee Blvd #207
West Palm Beach, FL 33411

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rosella Simmons
4200 Community Dr #2415
West Palm Beach, FL 33409

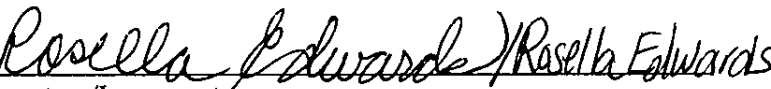
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent

07-01-2010

Date



Signature/Incorporator

07-01-2010

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUL 15 AM 10:47

APPROVED
AND
FILED