

N 10000007101

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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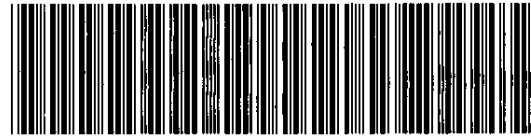
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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APPROVED  
AND  
FILED

10 JUL 28 PM 12:57

SECRETARY OF STATE  
TALLAHASSEE, FL 32302

PS 7/30/10

## COVER LETTER

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

**SUBJECT: AENON TEMPLE COMMUNITY DEVELOPMENT CORPORATION**  
**(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: FONTELLA JONES  
Name (Printed or typed)

517 LIGHTHORSE LANE  
Address

ORLANDO FL 32818  
City, State & Zip

407-883-3100  
Daytime Telephone number

Aenontemple@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:

AENON TEMPLE COMMUNITY DEVELOPMENT CORPORATION(hereinafter referred to as "the corporation")

**ARTICLE II PRINCIPAL OFFICE**

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

517 LIGHTHORSE LANE  
ORLANDO FL 32818

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

AS PROVIDED FOR IN THE BY-LAWS

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

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

PRESIDENT: SAMUEL JONES  
517 LIGHTHORSE LANE  
ORLANDO FL 32818

VICE PRESIDENT: RONALD ANDERSON  
9814 BLUE PALM WAY  
TAMPA FL 33610

SECRETARY/TREASURER: FONTELLA JONES  
517 LIGHTHORSE LANE  
ORLANDO FL 32818

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

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

FONTELLA JONES  
517 LIGHTHORSE LANE  
ORLANDO FL

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

SAMUEL JONES  
517 LIGHTHORSE LANE  
ORLANDO FL 32818

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TALLAHASSEE, FLORIDA

\*\*\*\*\*

*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

05/03/2010

Date

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

05/03/2010

Date