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SECRETAL OF STATE
(ALL ALIASSEE, FLORIDA

T. Burch 1114.1.8.2010

COVER LETTER

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

SUBJECT: A Child's Last Rights, Inc.					
	(PROPOSED CORPORAT	E NAME – <u>MUST INCLI</u>	UDE SUFFIX)		
Enclosed is an original a	and one (1) copy of the Artic	eles of Incorporation and	d 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 CO	OPY REQUIRED		
FROM: Tammy M. Brown Name (Printed or typed)					
5308 Poppy Drive					
Jacksonville, FL 32205 City, State & Zip					
904 - 563 - 0489					
	5308 Polyantime Telephone number				

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

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATIONIn compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I	NAME			
The name of the c	orporation shall be: A Child's Last Rights, Ir	nc		
ARTICLE II	PRINCIPAL OFFICE			
	Principal street address		Mailing address, if different is:	
	5308 Poppy Drive	-		
	Jacksonville, Fl. 32205	- -		
ARTICLE III	PURPOSE			
The purpose for v	which the corporation is organized is:			
to provide me	onetary assistance to parents who hav	e lost a child	to death and are financially unable	
	eral, burial, and/or cremation costs and			
	parents whose child was killed due to			
ARTICLE IV	MANNER OF ELECTION The manner in v		• •	
Initially appoi	inted, all subsequent board members v	will be electe	ed by 2/3 majority of the sitting board.	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR			
	itle: Tammy M. Brown Founder / Executive Director		e:Darian J. Brown	
Address:	5308 Poppy Drive	Address:	Board Member	
	Jacksonville, FL 32205	-	5308 Poppy Drive Jacksonville, FL 32205	
		-	•	
	itle: Jaqueline Lazarus		e: <u>Linda Benear</u>	
Address:	Board Member	Address:	Board Member	
	6885 Fairway Ave. S.E. Salem. OR 97306	-	1296 Talbot Ave. Jacksonville, FL 32205	
	,	-		
	itle: Bill Kilgannon		e:Glenda Wann	
Address:	Board Chairman 422 Jacksonville Drive	Address:	Board Member 4540 Southside Blvd. Suite 504	
	Jacksonville Beach, FL 32250	•	Jacksonville, FL 32216	
	,	-		
ARTICLE VI	REGISTERED AGENT		20 20 20 20 20 20 20 20 20 20 20 20 20 2	
Name:	orida street address (P.O. Box NOT acceptable) of Bill Kilgannon	the registered ago	ent is:	
Address:	422 Jacksonville Drive		= = = = = = = = = = = = = = = = = = =	
	Jacksonville Beach, FL 32250	•		
		•	Harris III	
ARTICLE VII	INCORPORATOR			
	dress of the Incorporator is:		بي چيز پ	
Name:	Tammy M. Brown		5 . 5	
Address:	5308 Poppy Drive		<i>></i> • • • • • • • • • • • • • • • • • • •	
	Jacksonville, FL 32205			
Having been nam	ed as registered agent to accept service of proces	s for the above	stated corporation at the place designated in this	
certificate, I am fa	miliar with and accept the appointment as registere	d agent and agre	ee to act in this capacity	
100 \0.	1 - P'11 V'1		1 1	
vill ye	Who - DIII NIgani	1017	11/12/2010	
•	Required Signature of Registered Agent		Date	
I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document				
to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.				
1/20/2				
_ amn	MA/VINOUN) - lammy	M.Bro	wn 10/08/2011	
/	Required Signature of Incorporator		Date	

ARTICLE VIII PROPOSED CLAUSE AND DISSOLUTION OF ASSETS PROVISION

In the event of the unforeseeable closure of A Child's Last Rights, all assets will be given to another nonprofit charity that provides services to underprivileged/impoverished children.

2010 NOV 17 PN 3:50