

N100000011/61

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

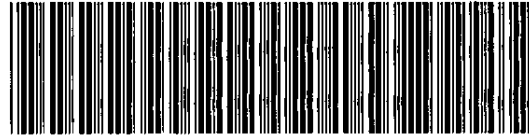
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRB
12/2

COVER LETTER

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

SUBJECT: Sassoon Heart Foundation 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: Sassoon Heart Foundation Inc.
Name (Printed or typed)

1811 NW 51st # 1264
Address

Ft. Lauderdale, FL. 33309
City, State & Zip

954-229-4047
Daytime Telephone number

reb@coralwave.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: Sassoon Heart Foundation Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
6500 Cypress Road Apt. 305
Plantation, Fl
33317-3040

Mailing address, if different is:
1811 NW 51st #1264
Ft. Lauderdale, Fl
33309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To facilitate fundraising for The Sir Victor Sassoon (Bah)
Heart Foundation.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

Nominated By Trustee

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Roy E. Barnes President
Address: 1811 NW 51st
#1264, Ft. Lauderdale
Fl. 33309

Name and Title: _____
Address: _____

Name and Title: Linda LaFleur Treasurer
Address: 1811 NW 51st
#1264, Ft. Lauderdale
Fl. 33309

Name and Title: _____
Address: _____

Name and Title: Thorson Rockwell Secretary
Address: 1811 NW 51st
#1264, Ft. Lauderdale
Fl. 33309

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Roy E. Barnes
Address: 6500 Cypress Road
Apt. 305 Plantation
Fl. 33317-3040

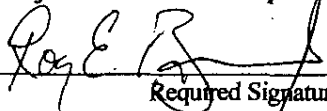
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Roy E. Barnes
Address: 1811 NW 51st
#1264, Ft. Lauderdale
Fl. 33309

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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



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.



Required Signature of Incorporator


Date