

N11000003515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

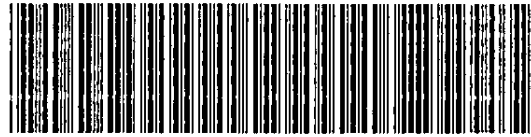
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
Wants to file as
a corporation.
can not file
conversion.

Office Use Only



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03/24/11--01028--007 **112.50

RECEIVED
11 APR -5 AM 11:31
DIVISION OF CORPORATIONS

~~11-11-11~~

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 APR -5 PM 2:14

APPROVED
AND
FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Community Resources Center Inc
Name of Florida Partnership

The enclosed Certificate of Conversion and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Ermilus Philius
Contact Person
Community Resources Center Inc
Firm/Company
23 Swinton Gardens Dr
Address
Delray Beach, FL 33444
City, State and Zip Code
ephilius1@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ermilus Philius at (954) 709-0476
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee \$33.75 Filing Fee and Certificate of Status \$77.50 Filing Fee and Certified Copy \$86.25 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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

ARTICLE I NAME

The name of the corporation shall be: Community Rehabilitation and Resources Center, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
23 Swinton Gardens Dr
Delray Beach, FL 33444

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
for educational and charitable purposes, including for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

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

At the annual meetings the members shall elect directors and officers. Ballots will be provided.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ermilus Philius, President
Address: 23 Swinton Gardens Dr
Delray Beach, FL 33444

Name and Title: Irvine Zulmar, Treasurer
Address: 2039 SW 12th Ct
Delray Beach, FL 33445

Name and Title: Jessy StCloud, Secretary
Address: 3442 Place Valencay
Deray Beacq, FL 33445

Name and Title: _____
Address: _____

Name and Title: Antoine Alliance, Vice- President
Address: 1338 SW 21th Way
Delray Beach, FL 33445

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: Lionel Mascille
Address: 27 Swinton Gardens Dr
Delray Beach, FL 33444

APPROVED
&
FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ermilus Philius
Address: 23 Swinton Gardens Dr
Delray Beach, FL 33444

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

Lionel Mascille
Required Signature of Registered Agent

3-08-2011
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.

[Signature]
Required Signature of Incorporator

3-08-11
Date