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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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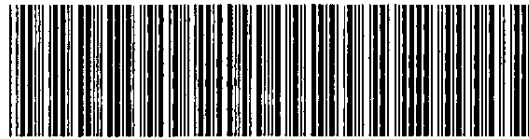
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W11-15986

und 4/18

## COVER LETTER

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

SUBJECT: Alexis Family 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: Alix Alexis  
Name (Printed or typed)

641 SW 30th ter  
Address

Ft Lauderdale FL 33312  
City, State & Zip

954 682 8178  
Daytime Telephone number

alix1.alexis@gmail.com  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

11 APR 14 PM 12:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

March 21, 2011

ALIX ALEXIS  
641 SW 30TH TER.  
FT. LAUDERDALE, FL 33312

SUBJECT: ALEXIS FAMILY FOUNDATION  
Ref. Number: W11000015986

We have received your document for ALEXIS FAMILY FOUNDATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 711A00006820

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

**ARTICLE I NAME**

The name of the corporation shall be: Alexis Family Foundation INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

641 SW 30th ter  
Ft Lauderdale FL  
33312

Mailing address, if different is

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide financial help to members of the Alexis  
Family in need. To celebrate accomplishments of family members

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

Family vote

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

Name and Title: Louis Alexis, chairman

Address: 641 SW 30th TER  
Ft. Lauderdale FL 33312

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Loubert Alexis, President

Address: 9031 N Lake Miramar CR  
Miramar FL 33025

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Alix Alexis Vice-President

Address: 641 SW 30th TER  
Ft Lauderdale FL 33312

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: Loubert Alexis  
Address: 9031 N Lake Miramar CR  
Miramar FL 33025

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Alix Alexis  
Address: 641 SW 30th ter  
Ft Lauderdale FL 33312

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]  
Required Signature of Registered Agent

2/21/11  
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

2/21/11  
Date