

N11000004088

(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:

Office Use Only



400198732944

03/22/11--01014--004 **78.75

FILED
2011 APR 22 AM 9:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

w11-17057
512

COVER LETTER

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

SUBJECT: _____
(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: H.O.M.E. of Daytona Beach inc
Name (Printed or typed)

215 Bay St.
Address

Daytona Beach Fla 32114
City, State & Zip

(386) 255-2095
Daytime Telephone number

williamcarter28@yahoo.com
E-mail address: (to be used for future annual report notification)

2011 APR 22 AM 9:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

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 H.O.M.E of Daytona Beach INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
215 Bay St.
Daytona Beach Fla
32114

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose for which H.O.M.E. of Daytona Beach is formed and organized is to work with other charitable and non-profit organizations to help end homelessness. We are reaching out to the community to help others understand that homelessness is not a normal state of affairs and that homelessness has concrete causes and real solutions. Homelessness is not a crime and should not be treated as one.

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

By Majority vote of executive council

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William Carter, President
Address: 340 North Street
Daytona Beach Fla 32114

Name and Title: Jon Richardó Vice President
Address: P.O. Box 250548
Holly Hill Fla. 32125

Name and Title: Jenifer Wilson, Secretary
Address: 340 North Street
Daytona Beach Fla 32114

Name and Title: Erick Pickering, Treasure
Address: 340 North Street
Daytona Beach Fla 32114

Name and Title:
Address:

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: InCorp Services, Inc
Address: 17888 67th Court North
Loxahatchee, Fl 33470
County: Palm Beach

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: William Carter
Address: 340 North Street
Daytona Beach Fla 32114

FILED
2011 APR 22 AM 9:17
SECRETARY OF STATE
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

William Carter on behalf of InCorp Services, Inc.
Required Signature of Registered Agent

2-8-11
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.

William Carter
Required Signature of Incorporator

3-17-11
Date