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TALLAHASSEE, FLORIDA

06/29/11

COVER LETTER

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

SUBJECT: The Catasha Odum Cancer Patients Donations Fund, 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: Lydia K. Johnson
Name (Printed or typed)

1362 North Mangonia Drive
Address

West Palm Beach, FL. 33401
City, State & Zip

(561) 659-3378
Daytime Telephone number

LITGodschild@aol.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: **The Catasha Odum Cancer Patients Donations Fund, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
1362 N. Mangonia Dr.
West Palm Beach, FL 33401

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide support by means of donations of clothing and other needed items to cancer patients.

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

Directors are elected by means of a consensus vote by members.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lydia K. Johnson, President / CEO
Address: 1362 N. Mangonia Dr.
West Palm Beach, FL 33401

Name and Title: Latasha Odum, Vice President
Address: 1362 N. Mangonia Dr.
West Palm Beach, FL 33401

Name and Title: Carla M. Jones, Treasurer
Address: 11965 N.W. 110th Avenue
Reddick, FL 32686

Name and Title: _____
Address: _____

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: Lydia K. Johnson
Address: 1362 N. Mangonia Dr.
West Palm Beach, FL 33401

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lydia K. Johnson
Address: 1362 N. Mangonia Dr.
West Palm Beach, FL 33401

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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

Lydia K. Johnson
Required Signature of Registered Agent

6/14/11
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.

Lydia K. Johnson
Required Signature of Incorporator

6/14/11
Date