N11000005984

(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:

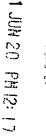
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W1000031073

COVER LETTER

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

SUBJECT: FECTIVA HAL PROPOSED CORPO	BOCAND HOMELESS RATE NAME - MUST INCLUDE SUFFIX	of Fl. Corp
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\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate		
		ADDITIONAL COPY REQUIRED		
FROM	David Cont	Trinted or typed)		
39542 Richland val				
	Zephykhill,	Statel & Zip 33540		
	(8B)312-8	344 813 514-1380 elephone number		
	E-mail address: (to be used for	99 Q J Cho) Com future annual report notification)		

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

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





FLORIDA DEPARTMENT OF STATE Division of Corporations

June 7, 2011

DAVID CONTI 39542 RICHLAND RD ZEPHYRHILLS, FL 33540

SUBJECT: FEEDING THE POOR AND HOMELESS OF FLORIDA CORP

Ref. Number: W11000031073

We have received your document for FEEDING THE POOR AND HOMELESS OF FLORIDA CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 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) 245-6995.

Jessica A Fason Regulatory Specialist II

Letter Number: 211A00013928

www.sunbiz.org

Division of Cornerations - P.O. ROX 6327 -Tallahassee Florida 32314

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

The name of the co	orporation shall be: Feeding the Poi	rand h	landess of	Florida	Corp
ARTICLE II	PRINCIPAL OFFICE 3954 Rich 6 nd rd 2004 Phills Fl 3354	,		ess, if different is:	
ARTICLE III	PURPOSE				
The purpose for v	which the corporation is organized is:	117.0 Nu	(CANK was	2 8115110	: 1
ferd	which the corporation is organized is: to with the home less and	less for	ortunate	people	2.
ARTICLE IV	MANNER OF ELECTION The manner in v	which the directors	are elected and appoin	ited:	
ARTICLE V Name and T Address:	INCLOW a point de by initial officers and/or director ide: ina-ellon campon director ide: ina-ellon campon is	Ma)DO RS OFF CEV Address:	ity Vol	vti Office	540
Name and T	`itle:	Name and Title:			
Address:		Address:			<u>.</u>
		. <u>-</u>			
Name and T Address:	Title:	Name and Title: Address:			
ARTICLE VI	REGISTERED AGENT	-		•	
	orida street address (P.O. Box NOT acceptable) of	the registered agent	t is:		
Name: Address:	David Conti 34542 Richland rd Zephyrhius, Pl 33540)			
ARTICLE VII	INCORPORATOR	2° 100			
The <u>name and ad</u> Name: Address:	dress of the Incorporator is: 1200 Con h 20542 Richiald Vd 200217 Hilliand Vd	40		10 may 1 mg 1 m	
	ned as registered agent to accept service of proces <u>miliar with and accept</u> the appointment as registere				ted in this
	Required Signature of Registered Agent		6	2/11 Date	-
	ment and affirm that the facts stated herein are tri of State constitutes a third degree felony as provide			on submitted in a	document
	1008		(0	الالا	
	Required Signature of Incorporator			Date	-