

N/1000008979

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

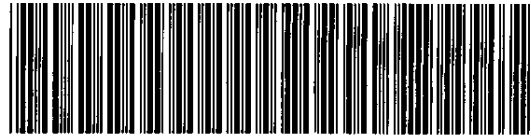
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE FLORIDA

K 09/22/11

COVER LETTER

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

SUBJECT: One Prolife Nation

(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: James R. Sanko

Name (Printed or typed)

33141 Irongate Dr.

Address

Leesburg, FL 34788

City, State & Zip

352-978-6336

33141 Irongate Dr. Telephone number

james@oneprolifenation.org

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: **One Prolife Nation, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
33141 Irongate Dr.
Leesburg, FL 34788

Mailing address, if different is:
P.O. Box 518
Tavares, FL 32778

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To inform individuals of where politicians and local officials stand on the abortion issue.

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

Majority vote.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Patrick B. Williams, President
Address: 8357 McNie Ave.
Sacramento, CA 95828

Name and Title: James R. Sanko, Treasurer
Address: 33141 Irongate Dr.
Leesburg, FL 34788

Name and Title: _____
Address: _____

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: James R. Sanko
Address: 33141 Irongate Dr.
Leesburg, FL 34788

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Patrick B. Williams
Address: 8357 McNie Ave.
Sacramento, CA 95828

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FALLDAK 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


Required Signature of Registered Agent

9/6/11
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.


Required Signature of Incorporator

9/14/2011
Date