

N120000000567

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

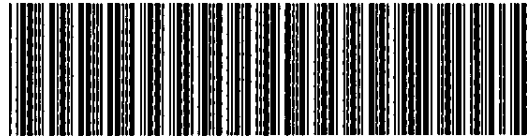
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Neferiti Abdullah
AUTHORIZATION BY PHONE TO *DAVE*
CORRECT *Article V*
DATE *1/18/12*
DOC. EXAM *MRS*

Office Use Only



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01/17/12--01028--003 **79.75

FILED
12 JAN 17 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
1/18/12

COVER LETTER

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

SUBJECT: THE AL DENSON 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: Al Denson
Name (Printed or typed)

6019 Bart Road
Address

Jacksonville, FL 32209
City, State & Zip

904-768-8584
Daytime Telephone number

nsa1981@hotmail.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)

FILED

12 JAN 17 PM 12:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different from above

ARTICLE I NAME

The name of the corporation shall be:

THE AL DENSON FOUNDATION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

6019 Bart Road

Jacksonville, FL 32209

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Promoting and providing academic and athletic scholarship, offering educational assistance, and developing youth programs geared toward "at-risk" youth in inner-city communities.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

Directors are appointed via a majority vote of all foundation members

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alfreda Butler, President

Address: 6019 Bart Road

Jacksonville, FL 32209

Name and Title: Al Denson, CEO/Founder

Address: 6019 Bart Road

Jacksonville, FL 32209

Name and Title: Aldrena Denson-Butler, Vice President

Address: 6019 Bart Road

Jacksonville, FL 32209

Name and Title: Geraldine Denson, Secretary

Address: 6019 Bart Road

Jacksonville, FL 32209

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: Al Denson

Address: 6019 Bart Road

Jacksonville, FL

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Al Denson

Address: 6019 Bart Road

Jacksonville, FL 32209

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

Alfred Denson

Required Signature of Registered Agent

01/02/2012

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.

Alfred Denson

Required Signature of Incorporator

01/02/2012

Date