Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporation SERVICE COMPANY

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195

Phone : (850)521-0821

Fax Number : (850)558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

FLORIDA PROFIT/NON PROFIT CORPORATION YOU TURN INC

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Corporate Filing Menu

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

ARTICLE I The name of the cor	NOME YOUTURN INC poration shall be:		
ARTICLE II	PRINCIPAL OFFICE		
	Principal <u>street</u> address 11547 561'H Pl N		Mailing address, if different is:
	West Palm Beach, FL 33411		
	17001 1 1001 1-00001.1 1 1 10-75-7-1		
ARTICLE III	PURPOSE		
	high the corporation is organized is:		
CHARITY SERV	· -		
•			
ARTICLE IV	MANNER OF ELECTION The manner		elected and appointed:
	As provided	d for in the bylaws	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	ORS	
Name and Ti Address:	tile: Monika Stefaniak, Director 11547 560H Pl N	Name and Title;	
Address.	-West Falm Bonsh, FL 33414		
	- CANA TANIA		
Name and Ti	tle: Jeff Stefaniak, Director	Name and Title:	
Address:	11547 56th PLN	Address:	
	West Pidm Beach FL		
Name and Ti	itle: Kail: Williams, Director	Name and Title:	
Address:	892 Danoin Tree Came	Address:	
	Wellington FL 33414		
ARTICLE VI	REGISTERED AGENT		7A 2
	rida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Mrinika Stefaniak		D7 -
Address:	11547 56th PLN		A B T
	West Palm Beach FL 33411		SSS
		·	m < co
ARTICLE VII	INCORPORATOR		
The name and add	fress of the Incorporator is: Monika Stefaniak		and the second s
Address:	U547.56TH PLN		SE G
ranes.	West Palm Beach, FL 33411	···········	9 9
	ed as registered ayens to accept service of pri		
certificate, 1 am fa	miliar with and accept the appointment as regis	tered agent and agree to	act in this capacity
	Liouse Aff		22.2012
By:	, , , , , , , , , , , , , , , , , , , ,		
Monika Stefanial	Required Signatures of Registered Agent	1	Date
	 ment and affirm that the facts stated herein ar	e true. I am aware thai a	ny false information submitted in a document
	of State constitutes a third degree felony as pro		
· (brought f		22 2 2011
	- cross		22.2012 Date
Monika Stefania	Required Signature of Incorporat	or	Date