## N1200000345

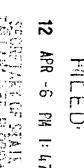
(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	<del></del>
(Document Number)	<del></del>
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1012-17504	





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## **COVER LETTER**

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

SUBJECT: The Pumpkin Project Inc.						
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )						
Enclosed is an original a	and one (1) copy of the Artic	les of Incorporation and	a check for :			
in the second se	o (1) oop; oro					
\$70.00	\$78.75	\$78.75	\$87.50			
Filing Fee	Filing Fee & Certificate of	Filing Fee & Certified Copy	☐ Filing Fee, Certified Copy			
	Status	& Centilled Copy	& Certificate			
		ADDITIONAL CO	PY REQUIRED			
EDOM.	Paige B James					
Name (Printed or typed)						
1816 Winn Arthur Dr						
Address						
Valrico, FL 33594						
City, State & Zip						
813-919-3985						
1816 Win Paythine Delephone number						
paigejames80@yahoo.com						

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

E-mail address: (to be used for future annual report notification)



March 28, 2012

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PAIGE B JAMES 1816 WINN ARTHUR DR VALRICO, FL 33594

SUBJECT: THE PUMPKIN PROJECT INC.

Ref. Number: W12000017524

We have received your document for THE PUMPKIN PROJECT INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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.

You must list at least one incorporator with a complete business street address.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 512A00010454

## ARTICLES OF INCORPORATION

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

¢

The name of the	The Pumpkin Proje corporation shall be:	ect Inc.	FALL TO
ARTICLE II	PRINCIPAL OFFICE		FALED.
	Principal street address		Mailing address AP Hiffagent is 1: 47
	1816 Winn Arthur Dr.		
	Valrico, FL 33594		SECO-1/15 OF CO.
		<del></del> -	TATE AT SECTION OF A THE
ARTICLE III	PURPOSE		The state of the s
	which the corporation is organized is:		*
	ations to purchase items to give to	children with medi	cal needs
000000	mono to parendos nomo to givo to		
ARTICLE IV	MANNER OF ELECTION The mann	er in which the directors	are elected and appointed:
	y Paige James		
• •	• •	CTORS	
ARTICLE V			Ryan D James - Vice President
Name and Address:	1816 Winn Arthur Dr		1816 Winn Arthur Dr
Addiess.	Valrico, FL 33594	Address.	Valrico, FL 33594
			701100,1120001
N 4 ?	Tid. Panita Dinnavald Coordan	Nt and 17:41	
Address:	715 Boylston St		
Address:	Leesburg, FL 34748	Audiess.	
	Leesburg, I L 04740	<del></del>	
Name and S	Tial	Name and Title	
, Name and Address:	Title:		
Addiess.			
ARTICLE VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptab	le) of the registered agen	ıt is:
Name:	Paige B James		
Address:	1816 Winn Arthur Dr	<del></del>	
	Valrico, FL 33594		
		<u> </u>	
ARTICLE VII	INCORPORATOR		
The name and ac	Idress of the Incorporator is:		
Name:	Paige B James		
Address:	1816 Winn Arthur Dr		
	Valrico, FL 33594	<del></del>	
		<del></del>	
			tated corporation at the place designated in this
certificate, I am f	familiar with and decept the appointment as reg	gistered agent and agree	to act in this capacity
		-	3-14-17
		<u> </u>	3-14-12
	Required Signature of Registered Age	ent	Date
I submit this doci	ument and affirm that the facts stated herein o	are true. I am aware the	at any false information submitted in a document
	of State constitules a third degree felony as p		
Á			•
P	1000		3-14-12
	Required Signature of Incorpor	ator	Date