

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations

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From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP

Account Number : 075500004387 Phone : (813)229-7600 Fax Number : (813)229-1660

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FLORIDA PROFIT/NON PROFIT CORPORATION It's About Change, Inc.

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Electronic Filing Menu

Corporate Filing Menu

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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

	ARTICLES OF IN In compliance with Chapter		
ARTICLE I The name of the cor	NAME It's About Change, Inc.		TE CONTINUE OF
	•		•
ARTICLE II	PRINCIPAL OFFICE Principal street address 101 East Kennedy Boulevard	_	Mailing address, if different is: P.O. Box 9537
	Suite 2800 Tampa, Florida 33602-5151	-	Tavernier, Florida 33070
A TOPTION IN THE	•	-	
The purpose for wh The purpose for impoverished	PURPOSE ich the corporation is organized is: or which the corporation is organized and to support worthwhile community and socially disadvantaged.		
ARTICLE IV Directors shall	MANNER OF ELECTION The manner in the beappointed and their replacements	which the directo s selected by	rs are elected and appointed: y the remaining members of the Board.
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR		
Name and Titl Address:	e: Michael G. Meads, President P.O. Box 9537	Name and Titl Address:	e: Nicholas M. Meads, Secretary 2299 12 Ct. N
ridaless.	Tavernier, Florida 33070	_ Address:	Apt. 817
		•	Arlington, Virginia 22201
Name and Titl	c:Cheryl A. Meads, Vice President	Name and Titl	e:Andrew M. Meads, Treasurer
Address:	P.O. Box 9537	Address;	31 Rickmar Lane
	Tavernier, Florida 33070	•	Malvern Pennsylvania 19355
Name and Titl	, in the second	. Na 170:41	
Address;	e:	Address:	o:
		•	
		-	
ARTICLE VI	REGISTERED AGENT		
Name and Flori	da street address (P.O. Box NOT acceptable) of Julio Esquivel	the registered ago	ent is:
Address:	101 East Kennedy Boulevard		
	Suite 2800	•	
	Tampa, Florida 33602-5151		
	INCORPORATOR		
The name and addr	ess of the Incorporator is: James I. Rothschild		
Address	1000 Jackson Street		
***************************************	Toledo, Ohio 43604		
Having been named certificate, I am fami	d as registered agent to accept service of proces. Hiar with and accept the appointment as registered	s for the above d agent and agre	stuted corporation at the place designated in this se to act in this capacity
<i>1</i> 1			06-11-2012
- 70	Required Signature of Registered Agent		Date
I submit this docume to the Department of	ent and affirm that the facts stated herein are tru State constitutes a third degree felony as provided	e, I am aware th d for In s.817.15.	nat any false information submitted in a document 5, F.S.
•	CAM & VILLA-		06-11-2012
	Required Signature of Incorporator		Date