N1200008144

(Requestor's Name)			
(requestor o realito)			
(Addross)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Outside A. C. A. ETC. Off.			
Special Instructions to Filing Officer GAVE			
, .			
AUTHORIZATION BY PHONE TO			
CORRECT Article T			
DATE			
DOS EYAM - OS			
BOOK CANAL			

Office Use Only



000238746960

08/23/12--01011--004 **78.75

COVER LETTER

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

> \$70.00 Filing Fee

SUBJECT: Bennie GASKINS Foundation for Impouerished Communities, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

\$78.75

Filing Fee

& Certified Copy

\$87.50

Filing Fee,

Certified Copy

Status	& Certificate
	ADDITIONAL COPY REQUIRED
FROM: JON G. Name (Prin	ASKINS ated or typed)
12700 BArtram	Park Blul #1732 dress
JACKSONVILLE, City, St	F1. 32258 ate & Zip
QOU-465 Daytime Tele	5-3666 ephone number
E-mail address: (to be used for fu	on O Comcast. Net

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

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

Filing Fee & Certificate of

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

ARTICLE I The name of the o	Corporation shall be: Benule Gaskins Foundation Co	ir Impoverished Communities, In
ARTICLE II	PRINCIPAL OFFICE Principal street address 12700 Bartram Park Blud. # 1732	Mailing address, if different is:
	JACKSONUITIE, FL 32258	
	PURPOSE which the corporation is organized is: Provide basic Need Basic Needs Meaning Food, Clothing, how s that assist also. We will try and get t which ent and then can provide support for the driven by Christian Morals, values an MANNER OF ELECTION The manner in which the directors are Directors will be Appointed and then elections	
ARTICLE V Name and 1 Address:	Title: Bennie Gaskins - Director Name and Title: 4607 Huy 112 South Address:	
Name and T Address:	Bridgooro, GA. 31705 Title: Jon Gaskins - Director Name and Title: 12700 Bartram Park But \$1730 Address:	
Name and 1 Address:	Title: Ken Brantley - Director + Name and Title: 6487-9 Pierce Chape Rd. Address:	
ARTICLE VI	Midland, Ga. 31820 REGISTERED AGENT Orida street address (P.O. Box NOT acceptable) of the registered agent is LON GASKINS 12700 Bartram Park But. # 1732 JACKSONUILLE, FL. 32258	SECRETARY OF ST STON OF CORPORT 12 AUG 23 PH 2:
ARTICLE VII The name and ad Name: Address:	INCORPORATOR Idress of the Incorporator is: JON GASKINS 12700 BAFFTAM PARK BUH \$ 1732 JACKSONUILLE, FL 32258	ATE VTIONS 20
	ned as registered agent to accept service of process for the above state amiliar with and accept the appointment as registered agent and agree to Required Signature of Registered Agent	
	ument and affirm that the facts stated herein are true. I am aware that at tof State constitutes a third degree felony as provided for in s.817.155, F.	