## N12000009780

| (Requestor's Name)                      |  |  |  |  |  |
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| (Address)                               |  |  |  |  |  |
|   |  |  |  |  |  |
| (Address)                               |  |  |  |  |  |
|   |  |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |
|   |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
|   |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |
| Cartified Capies Cartificates of Status |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |
|   |  |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |  |
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## **COVER LETTER**

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

SUBJECT: Lee Says No to Predatory Gambling, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

| Enclosed is an original | and one (1) copy of the A                  | rticles of Incorporation and        | d 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 C                        | ADDITIONAL COPY REQUIRED                         |  |

| FROM: | Mark Andrews                       |  |  |  |
|-------|------------------------------------|--|--|--|
|       | Name (Printed or typed)            |  |  |  |
|       | 3869 West Gulf Drive               |  |  |  |
|       | Address                            |  |  |  |
|       | Sanibel, FL 33957                  |  |  |  |
|       | City, State & Zip                  |  |  |  |
|       | 239-395-2252                       |  |  |  |
|       | 3869 West artimorifelephone number |  |  |  |

mark@mpandrews.us

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)

|                           | NAME Lee Says No to Pred                         | datory Gambling, Inc           |   |
|---------------------------|--|--------------------------------|---|
| The name of the corp      | poration shall be:                               | •                              | FLED  |
| ARTICLE II                | PRINCIPAL OFFICE                                 |                                |   |
|                           | Principal street address                         |                                | Mailing address, if 12 ferencii: 12 PM 2: 0             |
|                           | 3869 West Gulf Drive                             |                                |   |
|                           | Sanibel, FL 33957                                |                                | SECRETARY OF STATE TALLAHASSEE, FLOREDA                 |
|                           |  | <u> </u>                       | A(BH) 3.1 FF. L. C. |
|                           | PURPOSE  |                                | ** · · · · · · · · · · · · · · · · · ·                  |
| • •                       | ich the corporation is organized is:             |                                | hina manhina  |
| To educate the            | e public about the negative conse                | quences of slot mac            | nine gambling   |
|                           |  |                                |   |
| ARTICLE IV                | MANNER OF ELECTION The manner                    | r in which the directors are   | elected and appointed:                                  |
| Appointed by t            | the incorporator                                 |                                |   |
|                           | INITIAL OFFICERS AND/OR DIREC                    |                                |   |
|                           | le: Mark Andrews, Pres &Treas                    |                                |   |
| Address:                  | 3869 West Gulf Drive                             | Address:                       |   |
|                           | Sanibel, FL 33957                                | <del></del>                    |   |
|                           |  |                                |   |
| Name and Tit              | le: Patricia Andrews, VP                         | Name and Title:                |   |
| Address:                  | 3869 West Gulf Drive                             | Address:                       |   |
|                           | Sanibel, FL 33957                                | <del></del>                    |   |
| N.T. 1 (1971)             |  | •                              |   |
| Name and Titl<br>Address: | le:  | Name and Title:                |   |
| Address:                  |  | Address.                       |   |
|                           |  |                                |   |
|                           | REGISTERED AGENT                                 |                                |   |
|                           | ida street address (P.O. Box NOT acceptable      | e) of the registered agent is: |   |
| Name:<br>Address:         | Mark Andrews 3869 West Gulf Drive                | <del></del>                    |   |
| Address.                  | Sanibel FL 33957                                 |                                |   |
|                           |  |                                |   |
|                           | <u>INCORPORATOR</u>                              |                                |   |
|                           | ress of the Incorporator is:                     |                                |   |
| Name:<br>Address:         | Mark Andrews                                     | <del></del>                    |   |
| Address:                  | 3869 West Gulf Drive<br>Sanibel. FL 33957        | <del></del>                    |   |
|                           | Samber, 1 E 33337                                |                                |   |
| Uming heen name           | d as peristaned arount to accept service of m    | ranges for the above stated    | l corporation at the place designated in this           |
|                           | iliar with and accept the appointment as regi    |                                |   |
| 1 / 1                     |  |                                |   |
| $\mathcal{M}$             | we ellalles                                      |                                | October 10, 2012  |
|                           | Required Signature of Registered Ager            | nt                             | Date  |
| I submit this docum       | ent and affirm that the facts stated herein a    | re true. I am aware that an    | y false information submitted in a document             |
|                           | f State constitutes a third degree felony as pro |                                |   |
| 1//                       | 1. 1 Con land                                    |                                |   |
| $\mathcal{W}$             | WI CHELLEST.                                     |                                | October 10, 2012  |
|                           | Decivined Signature of Incorpora                 | tor                            | Data  |