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COVER LETTER

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

SUBJECT: Art	For The Ages (PROPOSED CORPORAT			
, ,	(PROPOSED CORPORAT	E NAME – <u>MUST INCL</u>	JDE SUFFIX)	
	•		•	
Enclosed is an original a	nd one (1) copy of the Artic	cles of Incorporation and	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	OPY REQUIRED	
,				
FROM: Luis Morales Name (Printed or typed)				
135 Sweetwater Circle Address				
Caufordville, FL 32327 City, State & Zip				
	(850) - 559 - 8210 Daytime Te	lephone number		
Luisdmorales 22 Qamail. Com 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)

he name of the corporation shall be:	t For The Ages, Inc.
	<i>J</i> = 3
RTICLE II PRINCIPAL OFFICE	M 10 11 20 000 21
Principal <u>street</u> address 135 Sweetwater Circle	Mailing address, if different is:
Crowfordville, FL 32	
Chawtordville, FE 32.	367
RTICLE III PURPOSE	
he purpose for which the corporation is organized is:	mice many for the development of
Community Outreach act programs	has morey for the accorded to
provide scholarships for Students	raise money for the development of for all different age groups. Also, to in Art programs and Architecture program
RTICLE IV MANNER OF ELECTION The man	ner in which the directors are elected and appointed:
They will be appointed by	Luis Morales
•	
Name and Title: Luis Morales, CEO	Name and Title:
Address: 1.35 Sweetwater Circle	Address:
Crawfordville, FL	
Carrie / F L	
	Name and Title:
Address:	Address:
	
Name and Title:	Name and Title:
Address:	
RTICLE VI REGISTERED AGENT	
ne name and Florida street address (P.O. Box NOT acceptal	hle) of the registered agent is:
Name: Luis Marales	of the registered agent is.
Address: 635 Sweetwater Circles	
Crawfordville, FL 32	
	2
RTICLE VII INCORPORATOR	in the same of the
ne name and address of the Incorporator is:	S S S
Name: Luis Marafes Address: L35 Sweetwater Circle	,
Cawfordville, FL 323	
CANDON INE PEL 028	
	process for the above stated corporation at the place designated in this
rtificate, I am familiar with and accept the appointment as re	gistered agent and agree to act in this capacity
/ May Morall	(0/22/2012
Required Signature of Registered Ag	gent Date
, · · ·	-
	are true, I am aware that any false information submitted in a document
the Department of State constitutes a third degree felony as p	provided for in s.817.155, F.S.
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Stelle Mouls	10/22/2012
Required Signature of Incorpo	prator Date