

N12000010320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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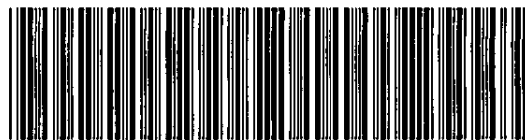
(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: **Parramore Boys School, Inc.**

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles 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 COPY REQUIRED

FROM: **Randolph Bracy**
Name (Printed or typed)

6735 Lorain St.
Address

Orlando, FL 32810
City, State & Zip

407-274-5405
Daytime Telephone number

randolphbracy@yahoo.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)

ARTICLE I NAME

The name of the corporation shall be: Parramore Boys School, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
6735 Lorain Street
Orlando, FL 32810

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PBS, Inc is organized exclusively for educational purposes, including the making of distributions to organizations that qualify as exempt organizations under section 501 c3 of the Internal Revenue Code. Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Elected at Annual Meeting.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Randolph Bracy
Address: 6735 Lorain St.
Orlando, FL 32810

Name and Title: Kyle Alexandre
Address: _____

Name and Title: Kerline Thomas
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Randolph Bracy
Address: 6735 Lorain Street
Orlando, FL 32810

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Randolph Bracy
Address: 6735 Lorain St.
Orlando, FL 32810

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Randolph Bracy
Required Signature of Registered Agent

10/25/2012
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Randolph Bracy
Required Signature of Incorporator

10/25/2012
Date

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