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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

YMD-11/27

COVER LETTER

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

SUBJECT: CHANGING THE ODDS, 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: HYACINTHE LAFONTANT
Name (Printed or typed)

3303 EAST ISLAND ROAD
Address

COOPER CITY, FL 33026
City, State & Zip

954.559.6799
Daytime Telephone number

hllafontant@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:

CHANGING THE ODDS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different

3303 EAST ISLAND ROAD
COOPER CITY, FL 33026

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CHANGING THE ODDS, INC IS COMMITTED TO EMPOWERING UNDERSERVED COMMUNITIES THROUGH EDUCATIONAL/VOCATIONAL TRAINING, HEALTH AND WELLNESS AND FAMILY PLANNING.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

MAJORITY VOTE.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HYACINTHE LAFONTANT/P
Address: 3303 EAST ISLAND ROAD
COOPER CITY, FL 33026

Name and Title: ZION ROBINSON/VP
Address: 713 SW 7TH AVE.
FT. LAUDERDALE, FL 33315

Name and Title: JACKI CENTOFANTI/SEC-TREAS.
Address: 321 SE 3RD STREET
DANIA, FL 33004

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: HYACINTHE LAFONTANT
Address: 3303 EAST ISLAND ROAD
COOPER CITY, FL 33026

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: HYACINTHE LAFONTANT
Address: 3303 EAST ISLAND ROAD
COOPER CITY, FL 33026

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



Required Signature of Registered Agent

11/18/12
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.



Required Signature of Incorporator

11/18/12
Date

Article __VIII__.

Said corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501 (c) (3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Article _IX_.

Upon dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of the section 501 (c) (3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

In witness whereof, we have hereunto subscribed our names this __17__
day of _____ November _____, __2012__.