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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| IN PERTELEPHONE |
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SECRETARY OF STATE
TALLAHASSEE, FLORID.

N 01/14/13

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

SUBJECT:

SHAUN THOMAS JEFFRIES FOUNDATION, INC.

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

X378.75

Filing Fee Filing Fee & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM:

Name

Janise Putney

Address

4233 Sheridan Ave.

City, State & Zip

Miami Beach, FL 33140

Daytime Telephone number

786-629-9133

E-mail address: yaelchai@gmail.com

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: Shaun Thomas Jeffries Foundation, Inc.

ARTICLE II PRINCIPAL OFFICE AND MAILING ADDRESS 4046 4th Court, Lantana, FL 33462

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

- This not-for-profit organization will raise awareness of the need for music education, maintain a website and blog for this purpose, and will raise funds to award scholarships for music students in need of money to purchase instruments and pursue music education. The scholarships will be based on need, as well as an application process, which will require a performance CD and a letter of recommendation.
- This nonprofit organization is organized exclusively for charitable and educational purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501©(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

Directors shall be elected by the incumbent members of the Board of Directors. Each member of the Board of Directors shall hold office for a period of two (2) years, or until such director's resignation, removal or death. Individual Member Directors may be nominated and reelected indefinitely.

Unless otherwise determined by the Board of Directors, the fiscal year shall be January 1 through December 31. The Board of Directors will hold its annual meeting in November. The place and time of such annual meeting may be fixed by written consent of the Directors.

ARTICLE V DISSOLUTION

Upon dissolution of the Corporation, the Board of Directors shall, after paying or making provision for payment of all liabilities of the Corporation, dispose of all assets for the exempt purposes of the Corporation or distribute to an organization described in Section 501 ©(3) or 170 ©(2) of the Internal Revenue Code.

ARTICLE VI

INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Janise Putney, President

Address:

Address:

4322 Sheridan Ave., Miami Beach, FL 33140

Name and Title:

Allegra Janise Jeffries, Secretary

4046 4th Court., Lantana, FL 33462

Name and Title:

Julia Elizabeth Honeyman, Treasurer

Address: 921 22nd Ave., Apt 1, Coralville, IA 52241

Name and Title:

Barbara Ann Winner, Board Member

Address:

3014 SaraLake Blvd., Sarasota, FL 34239

Name and Title:

Doris Grampp Fermin, Board Member

Address:

911 NE 23rd St., Pompano Beach, FL 33064

Name and Title:

Ann Holter, Board Member

Address:

200 Briarcrest 117, Ann Arbor, MI 48104

ARTICLE VII

REGISTERED AGENT

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

Name:

Allegra Jeffries

Address:

4046 4th Court., Lantana, FL 33462

Phone:

561-674-2266

Email:

allegra.jeffrjes@gmail.com

ARTICLE VIII

INCORPORATOR

The name and address of the Incorporator is:

Name:

Janise Putney

Address:

4233 Sheridan Ave., Miami Beach, FL 33140

Phone:

786-629-9133

Email:

yaelchai@gmail.com

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

AMM CA CAMPAGE OF Registered Agent Da

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

Date

18 December 2012

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SECKETARY OF STATE
TAIL AHASSEE, FLORIG