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| PICK-UP WAIT MAIL | | | | | | |
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| Codificat Courses Codificates of Clabus | | | | | | |
| Certified Copies Certificates of Status | | | | | | |
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| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



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SECKETALY OF STATE

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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 10, 2013

EARL BEDFORD 1067 ASHLAND AVE TARPON SPRINGS, FL 34689

SUBJECT: LIFE AFTER SPORTS FOUNDATION

Ref. Number: W13000001979

We have received your document for LIFE AFTER SPORTS FOUNDATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Bylaws are not filed with this office.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers Regulatory Specialist II New Filing Section

Letter Number: 313A00000728

COVER LETTER

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

SUBJECT: Life After Sports Foundation
(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: Earl Bedford

Name (Printed or typed)

1067 Ashland Avenue

Address

Tarpon Springs, Fla 34689

City, State & Zip

727-656-6173

Daytime Telephone number

tjeabt@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)

| The name of the co | orporation shall be: Life After Sports, Inco | rporated | | | | |
|------------------------------------|--|---------------------------|-----------------------------------|-----------------|---------------------------------------|----------|
| ARTICLE II | PRINCIPAL OFFICE Principal street address | | Mailing address, if different is: | | | |
| | 1067 Ashtand Avenue Tarpon Springs, Florida 34689 | | Tarpon Springs, Florida 34688 | 3 | · · · · · · · · · · · · · · · · · · · | |
| | | - | | | | |
| ARTICLE III | PURPOSE | | • | | | |
| The purpose for w | which the corporation is organized is: | | | | | |
| | purpose(s) of the foundation is to | | | | | |
| | age youths, financial assistance through counseling, schooling | • | less and to work w | ith former | atnie | tes |
| | | , | | | | |
| ARTICLE IV | MANNER OF ELECTION The man id IV of the submitted Bylaws. | ner in which the directo | ors are elected and appoil | nted: | | |
| | • | *OTOBO | | | | |
| ARTICLE V | INITIAL OFFICERS AND/OR DIRI | Name and Tit | e: Irene Bedford | | | |
| Address: | Founder and President | Address: | Chief Executive Officer | | | |
| | 1067 Ashland Avenue | | 6717 Mirror Lake Avenue | | | • |
| | Tarpon Springs, Florida 34889 | | Tampa, Florida 33634 | | | |
| Name and T | itle: Charlene Bedford | Name and Tit | le: | | • | |
| Address: | Secretary | Address: | | | | |
| | 8802 Frostwood Court | . | | | | ··· |
| | Tampa, Fiorida 33634 | | | | | |
| Name and T | itle: | Name and Tit | ile: | | | |
| Address: | | | | | | |
| | | | | | | |
| | | | | | - | |
| ARTICLE VI | REGISTERED AGENT | | | AEC AEC | M | |
| | orida street address (P.O. Box NOT accept | able) of the registered a | agent is: | 結正 | <u>د</u> م:ر | |
| Name: | Earl Bedford | | | 7,2: | \sim | _y; |
| Address: | 1067 Ashland Avenue Tarpon Springs, Florida 34689 | | | 35 | 10 | <u> </u> |
| | raipon springs, riolida 34008 | . | | ` <u>,''</u> Ç | PΜ | |
| | | | | ည်လ | 22 | |
| ARTICLE VII | INCORPORATOR | | | 黑呂 | | |
| | dress of the Incorporator is: | | | ¥m | _ | |
| Name: | Earl Bedford | | | | | |
| Address: | 1067 Ashland Avenue Tarpon Springs, Florida 34689 | | | | | |
| | raipar opings, rionez aveco | | | | | |
| | | | | | | |
| | ned as registered agent to accept service of | | | | ignated | in this |
| certificate, I am f | amiliar with and accept the appointment as | registered agent and a | gree to act in this capac | ity | | |
| ہسب | | | | | | |
| | ree / | | 18 Januar | 18 January 2013 | | |
| | Required Signature of Registered A | Agent | | Date | | |
| I submit this docu | iment and affirm that the facts stated hereii | are true. I am aware | that any false informati | on submitted | in a do | cument |
| to the Departmen | t of State constitutes a third degree felony a | s provided for in s.817. | .155, F.S. | | | |
| Ĵ | - 11 // - | | | | | |
| Zu_ | | | 18 Janua | ry 2013 | | |
| Required Signature of Incorporator | | | | Date | | |