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W13-22195



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ALL AHASSEE FLORID

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COVER LETTER

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

SUBJECT:	Paul Chape	Foundation	
	(PROPOSED CORPORA	i e name – <u>must inclui</u>	DE SUFFIX)
.			
Enclosed is an original a	na one (1) copy of the Ar	ticles of Incorporation and	a cneck for:
\$70,00	\$78.75	□\$78.75	\$87.50
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,
Č	Certificate of Status	& Certified Copy	Certified Copy & Certificate
		ADDITIONAL COPY REQUIRED	
		/	

Name (Printed or typed)

2735 SIVET Riage Dr

Address

Dr 1000 Ft 32818

City, State & Zip

321, 947, 6946

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 16, 2013

RHONDA KUCHARSKY 2735 SILVER RIDGE DR ORLANDO, FL 32818

SUBJECT: PAUL CHAPO FOUNDATION

Ref. Number: W13000022195

We have received your document for PAUL CHAPO 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.

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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 713A00009064

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)
ARTICLE I NAME The name of the corporation shall be: faul Chapo Foundation Corp.
ARTICLE II PRINCIPAL OFFICE
Principal street address: 2736 SIIVER Ridge Dr Mailing address, if different is:
Orlando, F1 32818
ARTICLE III PURPOSE The purpose for which the corporation is organized is: WCWSIVELY FOR Characteristics On the purpose of
Including college scholarship awards,
Leukensia and bone marrow transplant
Tesearch and awareness campaigns.
ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Majority VOTE OF CUrrent directors, annually
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
Name and Title: Rhonda Kucharsky, Name and Title: William Kucharsky,
Address President, Will Address: Preside Dr. 2735 Silver Ridge Dr. 01/4000, FL 35818 - Orlando, FL 35818
Name and Title: Kevin Chapo, Name and Title: Kinzberly Bogarts
Address VICE-Chair Address: Secretary 1386 Devonshire 1173 Ann Arborred Grosse Point Park, MI Plymouth, MI 48170
Name and Title:
Address Address:

Name and Title:	Name and Title:	
Address	Address:	The state of the s
		13 APR 26 PM 2: 17
		SECRETARY OF STATE TALLAHASSEE FLORIDA
Name and Title:	Name and Title:	
Address	Address:	.
		
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box	NOT acceptable) of the registered ager	nt is:
Name: Rhonda X	'ucharsku	
Address: 2135 S//	ver Ridge DI	
Orlando,	FL 32818	
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator is:	Kucharsky	
Name:	in Pille Dr	
Address: Orlando,	F1 35818	
Having been named as registered agent to acce	ept service of process for the above st	ated corporation at the place designated in this
certificate, I am familiar with and accept the app		e to act in this capacity
Required Signature of	Registered Agent	- 4/10/13 Date
I submit this document and affirm that the facts to the Department of State constitutes g third deg		
Khonda A	achassing are of Incorporator	4/10/13
required digitality		Date