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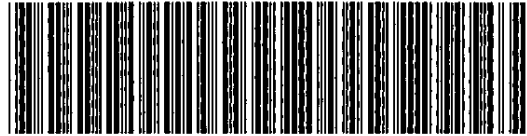
(Business Entity Name)

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TALLAHASSEE, FLORIDA

κ 07/18/13

COVER LETTER

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

SUBJECT: THE AMERICAN ASSOCIATION OF FUN LOVIN' SENIORS, 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: DONALD H. VANNICE
Name (Printed or typed)

8810 BAY HILL BLVD.
Address

ORLANDO, FLORIDA 32819
City, State & Zip

352-223-7451
Daytime Telephone number

DONVANNICE@GMAIL.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: THE AMERICAN ASSOCIATION OF FUN LOVIN' SENIORS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

8810 BAY HILL BLVD.

ORLANDO, FL 32819

Mailing address, if different is:

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INTRODUCE SENIOR CITIZENS TO THE ANTI-AGING BENEFITS OF
USING HUMOR AND LAUGHTER TO IMPROVE THEIR HEALTH AND THEIR
STATES OF MIND BY PERFORMING LAUGH THERAPY SEMINARS.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

DIRECTORS ARE APPOINTED AND DISMISSED BY THE PRESIDENT.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DONALD H. VANNICE Name and Title: ANGELA D. DAMON, DIRECTOR
PRESIDENT / TREASURER

Address: 8810 BAY HILL BLVD. Address: 14915 FOXGATE ROAD
ORLANDO, FL 32819 MONTVERDE, FL 32756

Name and Title: JOY A. VANNICE Name and Title: REBECCA A. SMITH, DIRECTOR
VICE PRES. / SECRETARY

Address: 8810 BAY HILL BLVD. Address: 332 KIRKALDY COURT
ORLANDO, FL 32819 WINTER SPRINGS, FL 32708

Name and Title: _____ Name and Title: MICHAEL A. BYRD

Address: _____ Address: 1250 BLYTHE AVE.
DELTONA, FL. 32725

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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 agent is:

Name: TANYA A. VANNICE

Address: 123 LIVE OAK DRIVE
WINTER GARDEN, FL 34787

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DONALD H. VANNICE

Address: 8810 BAY HILL BLVD.
ORLANDO, FL 32819

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

Tanya A. Vannice
Required Signature of Registered Agent

7/8/13
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.

Donald H. Vannice
Required Signature of Incorporator

7-8-13
Date

* SEE ARTICLE VIII

THE AMERICAN ASSOCIATION OF FUN LOVIN' SENIORS, INC.

ARTICLE VIII - DISSOLUTION OF THE CORPORATION

UPON DISSOLUTION OF THE CORPORATION, ASSETS SHALL BE DISTRIBUTED IN ACCORDANCE WITH THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND ALL STATE OF FLORIDA STATUTES,

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