

**N13000007217**

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(Requestor's Name)

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(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

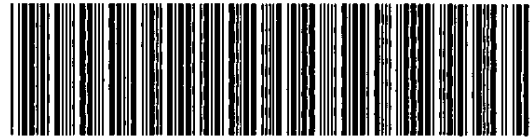
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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06/14/13--01005--001 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 AUG -8 AM 11:49

**FILED**

*W13 - 35006*

*✓ 08/13/13*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 17, 2013

CARRIE FARRIS  
3093-1 LANNIE RD.  
JACKSONVILLE, FL 32218

SUBJECT: HOMESCHOOL CHARITY BALL, INC.  
Ref. Number: W13000035006

We have received your document for HOMESCHOOL CHARITY BALL, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

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.

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.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 913A00015201

## COVER LETTER

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

SUBJECT: Homeschool Charity Ball, 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: Carrie Farris  
Name (Printed or typed)

3093-1 Lannie Rd  
Address

Jacksonville, FL 32218  
City, State & Zip

904-881-5773  
Daytime Telephone number

homeschoolcharityball@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: Homeschool Charity Ball, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

3093-1 Lannie Rd  
Jacksonville, FL 32218

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The purpose of our charitable organization is to coordinate and raise funds for an annual ball, of which the proceeds and donations will benefit various organizations of the boards choosing.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: By majority vote of the volunteers

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

President

Name and Title:	<u>Charish Atriedes-Cantrell</u>	Name and Title:	<u>Marie Sokol Vice-President</u>
Address	<u>3093-1 Lannie Rd.</u>	Address:	<u>1550-A Halsema Rd. N</u>
	<u>Jacksonville, FL</u>		<u>Jacksonville, FL</u>
	<u>32218</u>		<u>32220</u>

Name and Title:	<u>Raechel Renfrow, Treasurer</u>	Name and Title:	<u>Olina Dennis Secretary</u>
Address	<u>997 Rock Bay Dr.</u>	Address:	<u>2634 Cobblestone Forest Dr.</u>
	<u>Jacksonville, FL</u>		<u>Jacksonville FL,</u>
	<u>32218</u>		<u>32225</u>

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

SECRETARY OF STATE  
FLORIDA

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FILED

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: Charish Atriedes-Cantrell

Address: 3093-1 Lannie Rd

Jacksonville, FL 32218

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Carrie Farris

Address: 3093-1 Lannie Rd

Jacksonville, FL 32218

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*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:*

Charish Atriedes-Cantrell  
Required Signature of Registered Agent

7/22/13  
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.817.133, F.S.*

Carrie Farris  
Required Signature of Incorporator

7/22/13  
Date