

N13000010975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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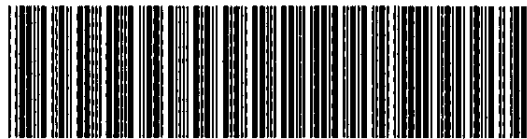
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: Hillsborough County Chapter, The Charmettes, 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: Joyce Austin
Name (Printed or typed)

10528 San Travano Drive
Address

Tampa, FL 33647
City, State & Zip

813 929-4323
Daytime Telephone number

joyce.austin@verizon.net
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: Hillsborough County Chapter, The Charmettes, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
10528 San Travano Drive
Tampa, FL 33647

Mailing address, if different is:
P O Box 11974
Tampa, FL 33680

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

- Our commitment and dedication is to our organization, our members, and to our communities;
- We welcome, value, and support the diversity of skills, expertise, tools and networks of the strong African American women who make up our membership; and
- We recognize the importance and benefits of supporting the eradication of cancer and partnering with historically black colleges and universities and others who share our values and share our values and support our mission.

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

All officers are elected for two years.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Delores Williams, President
Address: 712 Langston Place
Tampa, FL 33619

Name and Title: Janice London, Vice President
Address: 5201 Cumberland Drive
Tampa, FL 33617

Name and Title: Joyce, Austin Treasurer
Address: 10528 San Travano Drive
Tampa, FL 33647

Name and Title: Evelyn Keeton, Financial Secretary
Address: 3210 E. Hanna Avenue
Tampa, FL 33610

Name and Title: Lejoan Franklin, Recording Secretary
Address: 4609 N Thonotosassa Avenue
Tampa, FL 33610

Name and Title: Juanita Cannon, Assistant Secretary
Address: 5906 North 34th Street
Tampa, FL 33610

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TALLAHASSEE, FLORIDA

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Name and Title: Jacqueline Wilds, Corresponding Secretary

Address: 3509 river Grove Drive
Tampa, FL 33610

Name and Title: Vivian Williams, Historian

Address: 2614 East 9th Avenue
Tampa, FL 33605

Name and Title: Sylvia Salter, Parliamentarian

Address: 710 West Street
Tampa, FL 33602

Name and Title: Yvonne Waldon, Chaplain

Address: 17402 Mary Charlotte Place
Lutz, FL 33549

ARTICLE VI REGISTERED AGENT

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

Name: Joyce Austin
Address: 10528 San Travano Drive
Tampa, FL 33647

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Evelyne Keeton
Address: 3210 E. Hanna Avenue
Tampa, FL 33610

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TALLAHASSEE FLORIDA

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

Joyce Austin
Required Signature of Registered Agent

11/8/2013
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.

Evelyne Keeton
Required Signature of Incorporator

11/8/2013
Date