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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Document Number)		
Certified Copies	_ Certificates	of Status
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W13-66662



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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 5, 2013

SHADE HERRING JR. 1119 EAST 14TH STREET JACKSONVILLE, FL 32206

SUBJECT: THE PHOENIX AVENUE COMMUNITY CENTER, INC.

Ref. Number: W13000066602

We have received your document for THE PHOENIX AVENUE COMMUNITY CENTER, 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 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.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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: 213A00027737

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF INCORPORATIONIn compliance with Chapter 617, F.S., (Not for Profit)

The name of the corporation shall be: The Phoen	nix Avenue Community Center, Inc.	
ARTICLE II PRINCIPAL OFFICE		
Principal street address: 1119 East 14th Street	Mailing address, if different is:	
Jacksonville, FL 32206		
	to provide assistance to the youth and seniors	
of the Eastside Zone, the Spring	field community, and the Phoenix Avenue	
neighborhood.		
The Corporation is organized ex	xclusively for charitable, religious, educational	
and scientific purposes, including	for such purposes, the making of distributions to	
organizations that qualify as an ex	xempt organization under section 501(c)(3) of the	
Internal Revenue Code, or the cor	responding section of any future federal tax code.	
ARTICLE IV MANNER OF ELECTION T	he manner in which the directors are elected and appointed:	
As set forth in the bylaws.	· · · · · · · · · · · · · · · · · · ·	
ARTICLE V INITIAL OFFICERS AND/OR	DIRECTORS	
	ent Name and Title: Gloria Roberts, Secretary 1856 East 24th Street	
Address 6403 Howe Drive	Address:	
Jacksonville, FL 32208	Jacksonville, FL 32206	
Name and Title: Tom Monts, Treasurer	> 1, - 1	
6993 Crystal River Ro	Name and Title:	
Jacksonville, FL 32219	Address:	
Jacksonvine, i L J22 is	771	
	Name and Title:	
	22 on	
Address	Address:	

Name and Title:		Name and Title:
Address		Address:
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Name and Title:		Name and Title:
Address		Address:
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ARTICLE VI	REGISTERED AGENT rida street address (P.O. Box NOT accep	ntable) of the registered agent is:
Name:	Shade Herring Jr.	
Address:	1119 East 14th Street	
	Jacksonville, FL 32206	
ARTICLE VII	INCORPORATOR	DEC 19 PH
	ress of the Incorporator is: Shade Herring Jr.	
Name:	6403 Howe Drive	
Address:	Jacksonville, FL 32208	
		·-
		of process for the above stated corporation at the place designated in this s registered agent and agree to act in this capacity
There	Required Signature of Registered	Agent Date Date
I submit this docum	nent and affirm that the facts stated here	in are true. I am aware that any false information submitted in a document
w ine Department	of State constitutes a third degree felony of	A
JKN K	Required Signature of Incorp	OK 17 2013 porator Date

The Phoenix Avenue Community Center, Inc. Articles of Incorporation Attachment

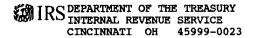
ARTICLE VIII- ADDITIONAL PROVISIONS

No part of the net earnings of the organization shall inure to the benefit of, or be distributed to its members, trustees, officers, or other private persons, except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the purpose clause hereof. No substantial part of the activities of the corporation shall consist of the carrying on of propaganda or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in, any political campaign on behalf of any candidate for public office. Notwithstanding any other provision of this document, the organization shall not carry on any other purposes not permitted to be carried on (a) by an organization exempt from federal income tax under section 501(c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or (b) by an organization, contributions to which are deductible under section 170(c) (2) of the Internal Revenue Code, or corresponding section of any future federal tax code.

The property of this corporation is irrevocably dedicated to charitable purposes and no part of the net income or assets of this corporation shall ever inure to the benefit of any director, officer or member thereof or to the benefit of any private person.

Upon dissolution of the Corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or state or local government for public purpose. Any such asset not so disposed of shall be disposed of by the Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purpose or to such organization or organizations as said Court shall determine, which are organized and operated exclusively for such purposes.

13 DEC 19 PH 12: 53



Date of this notice: 10-15-2013

Employer Identification Number:

46-3865537

Form: SS-4

Number of this notice: CP 575 E

For assistance you may call us at:

1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

CS PHOENIX AVENUE COMMUNITY CENTER
CI PHOENIX AVENU

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 46-3865537. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it's very important that you use your EIN along with your complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information shown above isn't correct, please send us the correction using the attached tear-off stub.

Annual filing requirements

Most organizations with an EIN have an annual filing requirement, even if they engage in minimal or no activity.

A. If you are tax exempt, you may be required to file one of the following returns or notices:

Form 990, Return of Organization Exempt From Income Tax Form 990-EZ, Short Form Return of Organization Exempt From Income Tax Form 990-PF, Return of Private Foundation Form 990-N, e-Postcard (available online only)

Additionally, you may be required to file your annual return electronically.

If an organization required to file a Form 990, Form 990-PF, Form 990-EZ, or Form 990-N does not do so for three consecutive years, its tax-exempt status is automatically revoked as of the due date of the third return or notice.

Please refer to www.irs.gov/990filing for the most current information on your filing requirements.

B. If you are not tax-exempt, you may be required to file one of the following returns:

Form 1120, U.S. Corporation Income Tax Return Form 1041, U.S. Income Tax Return for Estates and Trusts Form 1065, U.S. Return of Partnership Income

Please refer to Publication 1635, Understanding Your EIN, for more information about which forms you may be required to file.

(IRS USE ONLY) 575E

Applying for Tax-Exempt Status

Receiving an EIN from the IRS is not the same thing as receiving IRS recognition of tax-exempt status. To apply for formal recognition of tax-exempt status, most organizations will need to complete either Form 1023, Application for Recognition Under Section 501(c)(3) of the Internal Revenue Code, or Form 1024, Application for Recognition of Exemption Under Section 501(a). Submit the completed form, all applicable attachments, and the required user fee to:

Internal Revenue Service PO Box 12192 Covington, KY 41012-0192

Publication 557, Tax Exempt Status for Your Organization, has details on the application, process as well as information on returns you may need to file.

Additional information

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you don't have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.
- * Provide future officers of your organization with a copy of this notice.

If you have questions about your EIN, you can contact us using the phone number or address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you don't need to write us, please don't complete and return this stub.

Your name control associated with this EIN is PHOE. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.