

N/400002345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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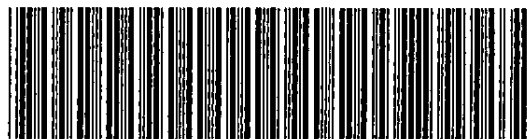
(Business Entity Name)

(Document Number)

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03/10/14--01008--004 **70.00

14 MAR 10 PM 1:59

CLERK
SECRETARY OF STATE
DIVISION OF CORPORATIONS

[Handwritten signature]
3-11-14

COVER LETTER

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

SUBJECT: **MITCH COMMUNITY SERVICES, 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: **Robin Wilcox**
Name (Printed or typed)

6631 Gentle Oaks Dr E
Address

Jacksonville, FL 32244
City, State & Zip

904-610-4812
Daytime Telephone number

m80hall@aol.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)

CLERK
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 10 PM 1:58

ARTICLE I NAME

The name of the corporation shall be: Mitch Community Services, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
6631 Gentle Oaks Drive E

Mailing address, if different is:

Jacksonville, FL 32244

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: exclusively for charitable, religious, educational, and scientific purposes under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: as stated in by-laws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robin Wilcox, Pres Ex-Dr Name and Title: _____

Address: 6631 Gentle Oaks Dr E Address: _____
Jacksonville, FL 32244

Name and Title: Kenyannya Wilcox - Sec Name and Title: _____

Address: 5411 Westland Station Address: _____
Jacksonville, FL 32244

Name and Title: Katanga Wilcox-Gilley - Trea Name and Title: _____

Address: 5411 Westland Station Address: _____
Jacksonville, FL 32244

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: Robin Wilcox
Address: 6631 Gentle Oaks Dr E
Jacksonville, FL 32244

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Robin B. M. Wilcox
Address: 6631 Gentle Oaks Dr E
Jacksonville, FL 32244

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

Robin B. M. Wilcox
Required Signature of Registered Agent

2-14-14
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.

Robin B. M. Wilcox
Required Signature of Incorporator

2-14-14
Date