

NA 000003770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP      ☐ WAIT      ☐ MAIL

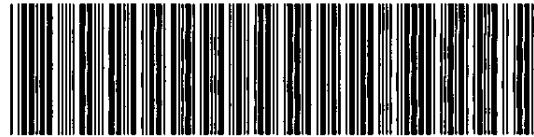
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

W4-21029

## COVER LETTER

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

**SUBJECT:** Consortium For Sustainable Communities, 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:** Sylvia Blackmon-Roberts  
Name (Printed or typed)

902 South Florida Avenue, Suite 205  
Address

Lakeland, FL 33803  
City, State & Zip

863-802-1280  
Daytime Telephone number

sylvia@blackmonroberts.com  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 2, 2014

SYLVIA BLACKMON-ROBERTS  
902 S FLORIDA AVE SUITE 205  
LAKELAND, FL 33803

SUBJECT: CONSORTIUM FOR SUSTAINABLE COMMUNITIES, INC.  
Ref. Number: W14000021029

We have received your document for CONSORTIUM FOR SUSTAINABLE COMMUNITIES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 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.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 614A00007052

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Consortium For Sustainable Communities, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
902 South Florida Avenue, Suite 205, Lakeland, FL 33803

Mailing address, if different is:

**ARTICLE III PURPOSE**

The Consortium for Sustainable Communities (CSC) purpose is to improve the quality of life for urban and rural communities across the United States of America and globally, while fostering and enriching healthy communities through education, economic and community development, political empowerment, and the nurturing of lasting partnerships between private enterprise, government, communities and neighborhoods.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: Board Members qualifications

*members will be nominated by board members and voted for approval/selection by majority vote.*

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

Name and Title: Sylvia Blackmon-Roberts, President/Sec.

Address: 1620 Lake Miriam Drive, Lakeland, FL 33813

Name and Title: Ava Parker

Address: 101 E Union St, Jacksonville, FL 32202

Name and Title: Mark V. Thomas, VP/Treasure

Address: 1416 Leighton Ave Lakeland, FL 33803

Name and Title: Katrina Lunsford

Address: 3733 Paula Court Lakeland, FL 33812

Name and Title: Al Pina, Director

Address: 1308 E. Giddens Ave Tampa FL 33603

Name and Title:

Address:

STATE OF FLORIDA  
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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**

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

Name: Sylvia Blackmon-Roberts

Address: 902 South Florida Avenue, Suite 205

Lakeland, FL 33803

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Name: Sylvia Blackmon-Roberts

Address: 902 South Florida Avenue, Suite 205

Lakeland, FL 33803

*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*

  
Required Signature of Registered Agent

3/27/14  
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.*

  
Required Signature of Incorporator

3/27/14

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA