

N 14000005510

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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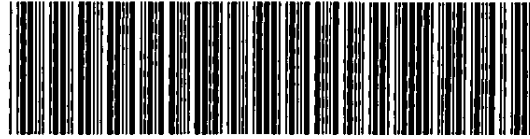
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

gf 6/11/14

COVER LETTER

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

SUBJECT: 2U4U Foundation, 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: Stephanie Moody

Name (Printed or typed)

710 Crystal Way

Address

Orange Park, FL. 32065

City, State & Zip

904-589-7279

Daytime Telephone number

mdymoodys@aol.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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: 2U4U Foundation, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address:
2230 Thomas Lynch Court

Mailing address, if different is _____

Orange Park, FL. 32073

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Exclusively for Charitable, Religious, Educational and Scientific purposes, including, for such purposes , the making of distributions and donations to organizations that qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code, or the corresponding Section of any future federal tax code.

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

The initial directors are appointed by the Founder/President and thereafter by a vote of the Board every 3 years

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Patrick Langston II / President
Address: 2230 Thomas Lynch Ct. # 2B
Orange Park, FL. 32073

Name and Title: Jessina Pipes / Secretary
Address: 3130 W. Monroe #205
Waukegan, IL. 60085

Name and Title: Stephanie Moody / V-President
Address: 710 Crystal Way
Orange Park, FL. 32065

Name and Title: Delorse Bays / Board Director
Address: 2230 Thomas Lynch Ct. #1A
Orange Park, FL. 32073

Name and Title: Renesha Langston / Treasurer
Address: 2230 Thomas Lynch Ct. # 2B
Orange Park, FL. 32073

Name and Title: Latarsha Moore / Board Director
Address: 710 Crystal Way
Orange Park, FL. 32065

Name and Title: Alicia Webb, / Board Director

Name and Title: _____

Address 2300 23rd St.
North Chicago, IL. 60044

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: Stephanie Moody

Address: 710 Crystal Way
Orange Park, FL. 32065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Patrick Langston II

Address: 2230 Thomas Lynch Ct.
Orange Park, FL. 32073

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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

Stephanie L. Moody

Required Signature of Registered Agent

mpy 30, 2014

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.

[Signature]

Required Signature of Incorporator

30 MAY 12 2014

Date