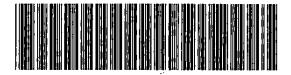
## N14000008039

(Requestor's Name)					
(Address)					
					(City/State/Zip/Phone #)
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(Business Entity Name)					
(Document Number)					
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SECRETARY OF STATE TALLAHASSEE, FLOWING

क्षेत्रशीय

12)14000039940

## **COVER LETTER**

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

SUBJECT: Passion for Service Incorporated

(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

Status

Filing Fee &

Certificate of

\$78.75 Filing Fee

\$87.50

& Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Deborah Weissberg

Name (Printed or typed)

Rosen College of Hospitality Management 9907 Universal BLVD

Address

Orlando, FL 32819

City, State & Zip

407-256-2825

Daytime Telephone number

deborah.weissberg@knights.ucf.edu

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

June 26, 2014

DEBORAH WERSBERG 9101 BAYWARD CT. ORLANDO, FL 32819

SUBJECT: PASSION FOR SERVICE INCORPORATED

Ref. Number: W14000039940

We have received your document for PASSION FOR SERVICE INCORPORATED 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 document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Please include the name of the corporation in Article I.

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 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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 614A00013953.

 $\subset$ 

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

The name of th	e corporation shall be: Passion for	r Service	Incorporated	FILED
ARTICLE II	PRINCIPAL OFFICE		14 /	NUG 22 AH 11: 22
Ros	Principal <u>street</u> address: en College of Hospitality Manage	ment	Mailing address, if different ISCRE	TARY OF STATE HASSEE, FLORIDA
99	07 Universal BLVD.			
Or	lando, FL 32819			
	T PURPOSE or which the corporation is organized is: A Oment in service provis			
<del></del>	ed by employers. Our Passic	<del></del>	<del></del>	<del></del>
	willing to play an active role, i		- · · · · · · · · · · · · · · · · · · ·	
	n cultivating eco-friendly valu	•		· · · · · · · · · · · · · · · · · · ·
	ugh highly relevant continuo		•	
	a sense of belonging and se			
ARTICLE IV	The moter of the moter of the moter of our members.	anner in which the	e directors are elected and appointed: B	ascu on
ARTICLE V		RECTORS		_
Name and Title	Deborah Weissberg (President)	Address:	Justin Allensworth (Secretary)	
	9101 Bayward Ct.		7629 Chapelhill Dr.	
	Orlando, FL 32819		Orlando, FL 32819	
Name and Title	- February news	Name and Title		
Address	VI V	Address:		
, radios		- 1144.000		
Name and Title	3:	Name and Title		•
Address				
. 1441033		Auditess.		
		•		

Name and Title:_		Name and Title:	
Address		Address:	
_			
Name and Title:			<u></u>
Address		Address:	· · · · · · · · · · · · · · · · · · ·
_			<del>.</del> .
ARTICLE VI	REGISTERED AGENT  orida street address (P.O. Box NOT acce	manhla) of the registered agent is:	
	Deborah Weissberg		
Name: Address:	9101 Bayward Ct	<del></del>	
	Orlando, FL 32819		<b>Ξ</b> Ω →
ARTICLE VII	INCORPORATOR lress of the Incorporator is:		# F T T T T T T T T T T T T T T T T T T
Name:	Deborah Weissberg	1	ILE 22 ※語見
Address:	9101 Bayward Ct		FLOR
	Orlando, FL 32819		: 22 IIDA
Wavina heen nam	ed as registered agent to accept service	of process for the above stated cor	noration at the place designated in this
	miliar with and accept the appointment a	s registered agent and agree to act i	
			95/12/1LA
D-14	Required Signature of Registered	Agent	Date
I submit this documents	ment and affirm that the facts stated here of State constitutes a third degree felony	in are true. I am aware that any fal.	se information submitted in a document
to the Department	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	us proviueu jor in 8.017.133, F.S.	الدا مراسا
N	Required Signature of Incor	porator	Blully Date