114000011103

(Re	questor's Name)	**		
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PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to	Filing Officer:			

0ffice Use Only
W1400W683357

DEC - 5 2014

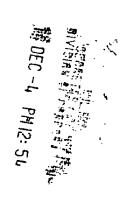
T. SCOTT



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10/27/14--01035--015 **43.75

12/04/14--01024--013 **26.25





FLORIDA DEPARTMENT OF STATE Division of Corporations

November 18, 2014

DONALD R. GONYNOR 16947 LAKESIDE DRIVE MONTVERDE, FL 34756

SUBJECT: SOUTH LAKE CHARITIES INCORPORATED

Ref. Number: W14000068335

We have received your document for SOUTH LAKE CHARITIES INCORPORATED and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The total fee is \$70 and balance due \$26.25., >

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

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.

To whom it may concern, As per your instructions I am writing this letter.

The Principals of South Lake Youth Charities LLC, and South Lake Youth Charities Incorporated, are all the same. It is the same entity and will operate as such. The LLC was applied for following the wrong advice from someone at the department of corporations.

Per the letter attached from Lee Rivers, from your internet support division, we have dissolve the LLC, and wish to incorporate so that the IRS can finish up our 501(3)(c) status.

Your assistance expediting this would be greatly appreciated.

Donald R. Gonynor South Lake Youth Charities 352-978-9131 southlakeyouthcharities@aol.com

COVER LETTER

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

SUBJECT: South Lake Youth Charities 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 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL COPY REQUIRED	

PROM:

Donald R. Gonynor

Name (Printed or typed)

16947 Lakeside Drive

Address

Montverde, Florida 34756

City, State & Zip

352-978-9131

Daytime Telephone number

southlakeyouthcharities@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)

The name of th	e corporation shall be: South Lake	Youth Cha	rities incorporated		_
169	PRINCIPAL OFFICE Principal street address: 47 Lakeside Drive		Mailing address, if different is:		
Mo	ntverde , Florida 34756				
	T PURPOSE or which the corporation is organized is: anization is organized exclusion	usively for	charitable, religious, edu	catic	onal.
	entific purposes under Sec				
	sponding section of any fut				
	sent activities include, but			ıs	
	e, from local supporters ar				
	e sales, flea markets and t				
ARTICLE IV			the R	oard of I	Directors
***************************************	ted by the directors at the annual meeting				
ARTICLE					
Name and Titl	_{e:} Donald R. Gonynor, CEO	Name and Title	Daphne L. Gonynor, MGR		
Address	16947 Lakeside Drive	_ Address:	16947 Lakeside Drive		
	Montverde, Fl. 34756	-	Montverde, Fl. 34756		
Name and Titl	Mary E. Sprankel, T	- Name and Title		' t1	039 .
Address	16947 Lakeside Drive	_ Address:		常品	N 251. 12
	Montverde, Fl. 34756	-		1-3	
Name and Tit	le:	- Name and Title	:	PH 12:	新
Address		_ Name and Thie Address:	·	2	
Audiess		_ Addiess.			- 1,7

Name and Title:		Name and Title:	_	
Address _		Address:		
Name and Title: Address		Name and Title: Address:		
ARTICLE VI	REGISTERED AGENT			'
	orida street address (P.O. Box NOT acce	ptable) of the registered agent is:		
Name:	Donald R. Gonynor			1
Address:	16947 Lakeside Drive			F
	Montverde, Fl. 34756		PM 12:	
A DATAL D LIVE	11770-100-170-		22	(
ARTICLE VII The name and ad	INCORPORATOR dress of the Incorporator is:			
Name:	Donald R. Gonynor			
Address:	16947 Lakeside Drive			
	Montverde Fl. 34756			
Having been nan certificate, I am fo	ned as registered agent to accept service amiliar with and accept the appointment a	of process for the above stated corporation at the place is registered agent and agree to act in this capacity	designated in t	his
Required Signature of Registered Agent		10/24/14		
		Agent Date		
I submit this docu to the Department	ment and affirm that the facts stated here t of State constitutes a third degree felony	ein are true. I am aware that any false information submit as provided for in s.817.155, F.S.	ted in a docum	ent
Donald a	Monna	10/24/14		
	Required Signature of Incor		<u></u>	