

N150000001368

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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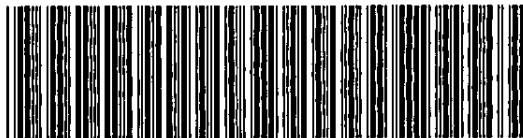
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

MD 2/10

## COVER LETTER

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

**SUBJECT:** Shoes, Socks, Shirts & Smiles, 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:** Lauren Baugh  
Name (Printed or typed)

1011 NW 6th Avenue  
Address

Cape Coral, FL. 33993  
City, State & Zip

239-834-1051  
Daytime Telephone number

givingbackfeelsgood@yahoo.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)

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be: Shoes, Socks, Shirts & Smiles, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
1415 Dean Street  
Fort Myers, FL. 33901

Mailing address, if different is:  
1011 NW 6th Avenue  
Cape Coral, FL. 33993

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To provide the needy and homeless with articles of clothing,  
shoes and any other items that can be collected in order to improve the quality of life for those who need it.  
Shoes, Socks, Shirts & Smiles, Inc. will hold drives to collect said items and will solicit individuals and companies  
to donate said items along with any other items they have to donate or would collect funds from them in order to  
purchase needed items to disperse to those who need them.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: Directors  
will be elected by Lauren Baugh; President .

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

Name and Title:	<u>Lauren Baugh; President</u>	Name and Title:	_____
Address	<u>1011 NW 6th Avenue</u> <u>Cape Coral, FL. 33993</u>	Address:	_____ _____ _____
Name and Title:	_____	Name and Title:	_____
Address	_____ _____ _____	Address:	_____ _____ _____
Name and Title:	_____	Name and Title:	_____
Address	_____ _____ _____	Address:	_____ _____ _____

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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STATE OF ALABAMA

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**ARTICLE VI REGISTERED AGENT**

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

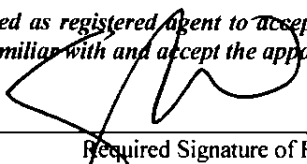
Name: Lauren Baugh  
Address: 1011 NW 6th Avenue  
Cape Coral, FL. 33901

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Lauren Baugh  
Address: 1011 NW 6th Avenue  
Cape Coral, FL. 33993

*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*

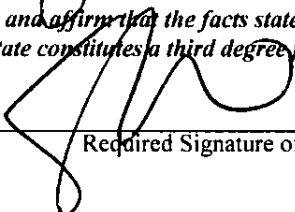


\_\_\_\_\_  
Required Signature of Registered Agent

01/27/2015

\_\_\_\_\_  
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

01/27/2015

\_\_\_\_\_  
Date