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(Address)

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15 MAR 16 PM 4:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: FLORIDA EXECUTIVE REALTY HOPE 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: DOUGLAS LOYD
Name (Printed or typed)

3050 S. DALE MABRY HWY
Address

TAMPA, FLORIDA 33629
City, State & Zip

813-972-
Daytime Telephone number

DOUG@FLORIDAEXECUTIVEREALTY.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)

ARTICLE I NAME

The name of the corporation shall be: FLORIDA EXECUTIVE REALTY HOPE FOUNDATION INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

3050 S. DALE MABRY HWY
TAMPA, FLORIDA 33629

Mailing address, if different is:

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: COLLECTION, COORDINATION AND DISBURSEMENT OF MONETARY CONTRIBUTIONS FROM AND TO THE PUBLIC, OTHER 501(c)3 ORGANIZATIONS AND NEEDY INDIVIDUALS.

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ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: NOMINATED BY CURRENT BOARD MEMBERS AND THEN ELECTED BY SAME TO STAGGERED 1, 2 AND 3 YEAR TERMS.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DOUGLAS LOYD - PRESIDENT
Address: 3050 S. DALE MABRY HWY, TAMPA FLORIDA 33629

Name and Title: GINA MILES - DIRECTOR
Address: 130 E. BLOOMINGDALE AVE, BRANDON, FLORIDA 33511

Name and Title: SHANNON LOYD - SECRETARY
Address: 3050 S. DALE MABRY, TAMPA, FLORIDA 33629

Name and Title: JAMES HENNING - DIRECTOR
Address: 3050 S. DALE MABRY HWY, TAMPA, FLORIDA 33629

Name and Title: LANCE LANDRUD - TREASURER
Address: 3050 S. DALE MABRY, TAMPA, FLORIDA 33629

Name and Title: ADRIANA MEJIA-TORO
Address: 10311 RADCLIFFE DR, TAMPA, FLORIDA 33624

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

_____ _____

_____ _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

_____ _____

_____ _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: DOUGLAS LOYD

Address: 3050 S. DALE MABRY HWY
TAMPA, FLORIDA 33629

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: DOUGLAS LOYD

Address: 3050 S. DALE MABRY HWY
TAMPA, FLORIDA 33629

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

_____ 3/13/2015
Required Signature of Registered Agent — 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.

_____ 3/13/2015
Required Signature of Incorporator — Date