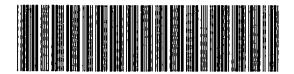
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(Re	equestor's Name)				
(Address)					
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(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					





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03/23/15--01024--008 **78.75

SECRETARY OF STATE

15 MAR 23 AM 10: 5





COVER LETTER

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

SUBJECT: The Mark Tucker Foundation 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 \$78.75

Filing Fee Filing Fee &

Certificate of

Status

□\$78.75

Filing Fee
& Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

jlcmle28@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)

ARTICLE I The name of the	NAME ne corporation shall be: The Mark Tu	ıcker Four	dation Incorporated			
ARTICLE II	,					
861	Principal <u>street</u> address: 2 Interbay Boulevard Tampa, FI 3	3616	Mailing address, if different is:			
	or which the corporation is organized is:		oundation is a non-profit corporation a		.	
	r charitable purposes within the meaning of	· 				
	future tax code. The Mark Tucker Foundat					
	stance to first responders families in need, 7					
	egardless of their race, ethnicity, or religion					
	-profit organizations which fall under the 501					
charitable pur	poses. It shall not be operated for the private	e gain of any pe	rson and is irrevocably dedicated to ch	aritable	e purpo	oses.
<i>ARTICLE IV</i> General el	MANNER OF ELECTION The m ection among the board with an		· · · · - 	SECRETA	5 MAR 23	
ARTICLE V	INITIAL OFFICERS AND/OR DI	RECTORS	in the second se		3 AM 10: 55	
Name and Title	President William Roeling	Name and Title	Director Jason L. Conne): 5 5	
Address	8612 Interbay Boulevard	Address:	8612 Interbay Boulevard	<u>i</u>		
	Tampa, Florida 33616		Tampa, Florida 33616	_		
Name and Title	Director Lonny Tucker	Name and Title	Director Shane Voit	-		
Address	8612 Interbay Boulevard	Address:	8612 Interbay Boulevard	<u>.</u>		
	Tampa, Florida 33616	,	Tampa, Florida 33616	- -		
Name and Title	Director Karyn Roeling	Name and Title:	Director Emily L. Connel	- 		
Address	8612 Interbay Boulevard	Address:	8612 Interbay Boulevard	- 		
	Tampa Florida 33616	_ 11ddi 035.	Tampa Florida 33616	-		

Name and T	Director Troy Morgan	Name and Title:	PHA A	ND Över
Address	8612 Interbay Boulevard	Address:	FIL.	LU-
11001000	Tampa, Florida 33616	Address	15 MAR 23	AM 10: 55
			SECRE VAFY TALL AHASSE	OF STATE E ELORIDA
Name and Tit	ile:	Name and Title:		
Address		Address:		
			·	
		-		
ARTICLE V				
The <u>name and</u>	d Florida street address (P.O. Box NOT accep	otable) of the registered agent	is:	
Name:	Jason L. Connell			
Address:	8612 Interbay Bouleva	<u>rd</u>		
	Tampa, Florida 33616			
ARTICLE V	II INCORPORATOR			
The name and	d address of the Incorporator is:			
Name:	Jason L. Connell			
Address:	8612 Interbay Bouleva	rd		
	Tampa, Florida 33616			
Having been certificate, I a	named us registered agent to accept service on familiar with and accept the appointment a	of process for the above stat s registered agent and agree	ted corporation at the p to act in this capacity	lace designated in this
		. <u></u>	March 1	12, 2015
	Required Signature of Registered	Agent	D	ate
I submit this a to the Departn	locument and affirm that the facts stated here nent of State constitutes of hird degree felony o	in are true. I am aware that a as provided for in s.817.155,	any false information su F.S.	bmitted in a document
			March ¹	12, 2015
	Required Signature of Incorp	oorator	<u></u>	Date