## N15000003255

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(Address)				
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PICK-UP WAIT MAIL				
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(Document Number)				
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15 MAR 30 PH 1: 46
SECRETARY OF STATE





## **COVER LETTER**

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

SUBJECT: Stewart Partners, 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 CO	PY REQUIRED

FROM: Carolyn House Stewart

Name (Printed or typed)

11719 Tom Folsom Road

Address

Thonotosassa, FL 33592

City, State & Zip

813 992-1908

Daytime Telephone number

possible2010@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)



AR1	Ί	CLE	I	1	NAME

ARTICLE I The name of th	NAME ne corporation shall be: STEWART F	PATRNER	S,INCORPORATED	LU
ARTICLE II			15 MAR 30	
117	Principal <u>street</u> address: 19 Tom Folsom Rd		Mailing address, if dinger AHASSE	OF STATE E. FLORIDA
The	onotosassa, Fl 33592			
ARTICLE II	I PURPOSE for		and advectional number	
	or which the corporation is organized is:			
	e mathematics tutoring, fina			<u> </u>
	nd community gardening/agricult			<u>-</u> _
Dissolution	on of assets shall be made t	o a charity	or not for profit 501(c)3 org	janization
ARTICLE V	/ INITIAL OFFICERS AND/OR DI	RECTORS		
Name and Title		Name and Title		
Address	11719 Tom Folsom Rd	Address:	2402 E 21st Ave	
	Thonotosassa, FI 33592		Tampa, Fl 33605	
Name and Title	Henry Smith, Director/Secretary	Name and Title	:	
Address	P O Box 22352	Address:		
	Tampa, FL 33602			
	c/o 2402 E 21st Ave Tampa, FI 33605			
Name and Title	:	Name and Title		
Address		Address:		

Name and Title:	Na	nme and Title:	APPROVE AND FILED	L
Address _	Ac		15 HAR 30 PM	1:46
-			SECRETARY OF TALLAHASSEE. FL	
Name and Title:	Na	ame and Title:		
Address _	Ad	ddress:		
_	· · · · · · · · · · · · · · · · · · ·			
_			<del>.</del>	
ARTICLE VI	REGISTERED AGENT lorida street address (P.O. Box NOT acceptab	le) of the registered age	ent is:	
Name:	Delano Stewart	··/ ··/ · · · · · · · · · · · · · · ·	<i></i>	
Address:	505 E Jackson St Suite 3	301		
Address:	Tampa, FL 33602			
ARTICLE VII	INCORPORATOR			
The name and a	ddress of the Incorporator is:			
Name:	Carolyn House Stewart			
Address:	11719 Tom Folsom Rd	<u>.</u>		
	Thonotosassa, FL 33592	<u></u>		
Having been nai	med as registered agent to accept service of pramiliar with and accept the appointment as registered Agent	gistered agent and agre	tated corporation at the place are to act in this capacity  Date	lesignated in this
I submit this doct to the Departmen	ument and affirm that the facts stated herein a at of State constitutes a third degree felony as p	re true. I am aware the rovided for in s.817.15. —	at any false information submitt 5, F.S.	ed in a document