

N15000003911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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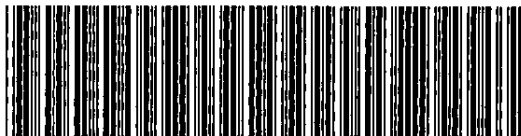
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 4/17/15

COVER LETTER

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

SUBJECT: Ruby Dean Harrington Hendrix Scholarship 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: Jacqueline H. Walton
Name (Printed or typed)

1840 Jerry Avenue
Address

Sanford, Florida 32771
City, State & Zip

407-688-0525
Daytime Telephone number

jwalton247@hotmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Ruby Dean Harrington Hendrix Scholarship Foundation, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1840 Jerry Avenue

Sanford, Florida 32771

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide low income students school supplies,
and to Award College Scholarships to graduating High School seniors or
young adults.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: _____
Directors will be appointed/ Chosen at a later date.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____ Name and Title: _____

Address _____ 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: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Jacqueline H. Walton

Address: 1840 Jerry Avenue
Sanford, Florida 32771

ARTICLE VII INCORPORATOR

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

Name: Jacqueline H. Walton

Address: 1840 Jerry Avenue
Sanford, Florida 32771

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

Jacqueline H. Walton
Required Signature of Registered Agent

4/13/15
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.

Jacqueline H. Walton
Required Signature of Incorporator

4/13/15
Date

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TALLAHASSEE, FLORIDA