

N15000005942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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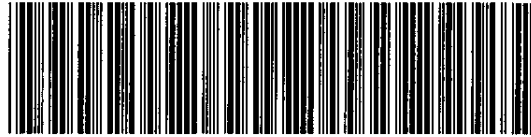
(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: Greater Orlando Citizen Action Network, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)
(Hereafter, known as GOCAN)

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: Cindy Youell
Name (Printed or typed)

351 Prima Vera Cove
Address

Altamonte Springs, FL 32714
City, State & Zip

407-694-6696
Daytime Telephone number

cyouinf1@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)

ARTICLE I NAME

The name of the corporation shall be: Greater Orlando Citizen Action Network, Inc.

ARTICLE II PRINCIPAL OFFICE (Hereafter, referred to as GOCAN)

Principal street address:

Mailing address, if different is:

351 Prima Vera Cove

Altamonte Springs, Fl.

32714

ARTICLE III PURPOSE (Bylaws included separately)

The purpose for which the corporation is organized is: to promote patriotic and civic awareness through social and educational platforms. GOCAN is a non profit that educates the community on matters of civic importance, including adherence to federal and state constitutions to further the common good and general welfare of citizens. GOCAN advocates limited government, fiscal responsibility, and free markets.

GOCAN assets will be used to support its function as an organization. GOCAN is non partisan and does not advocate for specific candidates or parties.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: appointed parties.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cindy Youell,
President

Name and Title: Timothy Youell,
Advisor

Address: 351 Prima Vera Cove
Altamonte Springs, Fl.
32714

Address: 351 Prima Vera Cove
Altamonte Springs, Fl.
32714

Name and Title: Diana Evans
Vice President

Name and Title: _____

Address: P.O. Box 181708
(1471 Southwind Dr.)
Casselberry, Fl. 32707

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
JUN 12 AM 8:46

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: Cindy Youell

Address: 351 Prima Vera Cove
Altamonte Springs, Fl. 32714

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Cindy Youell

Address: 351 Prima Vera Cove
Altamonte Springs, Fl. 32714

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Cindy Youell

Required Signature of Registered Agent

6/8/15
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.

Cindy Youell

Required Signature of Incorporator

6/8/15
Date

Cindy Youell