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COVER LETTER

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

SUBJECT:	m Nation, Inc.				
	(PROPOSED CORPO	PRATE NAME - MUST IN	CLUDE SUFFIX)		
Enclosed is an original a	and one (1) copy of the Arti	cles of Incorporation and	a check for :		
	_				
\$70.00	\$78.75	□\$78.75	\$87.50		
Filing Fee	Filing Fee & Certificate of	Filing Fee & Certified Copy	Filing Fee, Certified Copy		
	Status	& Certified Copy	& Certificate		
		ADDITIONAL CO	PY REQUIRED		
FROM:	Valerie Buchand		_		
	Nam	e (Printed or typed)			
	1425 25th Street				
		Address	-		
	G (F) '1 24224				
	Sarasota, Florida, 34234	7. 0. 7.	-		
City, State & Zip					
	941-544-3262				

vbuchand@gmail.com

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

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

Daytime Telephone number

ARTICLES OF INCORPORATION

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

ARTICLE I The name of the	NAME The Newtown	n Nation, Inc.		300 000	5	
ARTICLE II	PRINCIPAL OFFICE			18 or 2		
1425	Principal <u>street</u> address: 25th Street	Р.	Mailing address, if dift O. Box 2111	ferent is:	19 PH	1
Sarasota, Florida 34234			rasota, Florida 34230	03 32 32	2: 53	
Newtown Nati	PURPOSE or which the corporation is organized on will advance and improve the live the belimited to the promotion of discussions.	ves of the community in S	· · · · · · · · · · · · · · · · · · ·	wtown. Said a	activitie	s shall
creation of con	nmittees and/or other organizations	to instigate and carry on	programs instigated by such d	iscussion.		
To raise fur	nds by direct appeal, the seeking of	grants or any other prope	r legal means needed to active	ite the progran	ıs prop	osed.
ARTICLE IV ARTICLE V	MANNER OF ELECTION Th		ectors are elected and appointe	d:		
Name and Title	Valerie Buchand	Name and Title	Lou Murray e:			
Address	1425 25th Street	Address:	idress: 9608 Portside Terrace			
	Sarasota, Florida 34234		Bradenton, Florida 34212			
Name and Title	Deanie Bergbreiter	Name and Titl	e:			
	1138 47th Street	Address:				
	Sarasota, Florida 34234	<u> </u>				
Name and Title	2:		e:			
Address		Address:				
						

Name and Title:_	`•	Name and Title:		-
Address		Address:		
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		A. 1.000.1		
				_
Address		Address:		_
		 		_
_				_
ı'				
	REGISTERED AGENT			
The name and Flo	orida street address (P.O. Box NOT accep	otable) of the registered agent is	<u> </u>	-
Name:	Valerie Buchand		7.5	15 J
Address:	1425 25th Street	······	٠.٠. ماران	I ii
	Sarasota, Florida 342	34		9
			<u>,</u>	PH
	INCORPORATOR Idress of the Incorporator is:			?: 5;
- .	Joseph J. Newman			ω
Name:	7903 Cyprtess Lake, 1	Dr		
Address:				
	Sarasota, Florida 34	243		
ARTICLE VIII	EFFECTIVE DATE: other than the date of filing: Filing I)ate		
	other than the date of filing:			business da
after the filing.)	·			
	inserted in this block does not meet the ap		ements, this date will not	be listed as th
document's effect	tive date on the Department of State's reco	rds.		
Having been nan	ned as registered agent to accept service (of process for the above state	d corporation at the plac	e designated
	amiliar with and accept the appointment a	s registered agent and agree to	o act in this capacity	,
certificate, I am f		(/	6/2/	2 4 //
certificate, I am fa	e Luchan		_ +/ 5/0	1015
certificate, I am f	Required Signature of Registered	Agent	9/3/3 Date	2015
Laler I submit this docu	ument and affirm that the facts stated here	in are true. I am aware that a	/ ny false information subn	
Submit this docu		in are true. I am aware that a	ny false information subm T.S./	