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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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COVER LETTER

ATT: Claretha

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

SUBJECT: Give A Kid A Coat 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: Debra Edmonds
Name (Printed or typed)

2634 Little Hill Cove Apt 208
Address

Orlando, FL 32765
City, State & Zip

407 862-2901
Daytime Telephone number

debraodella@810@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: Give A kid A coat foundation INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

2634 Little Hill Cove Apt 208

Oviedo, FL 32765

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Give A kid A coat is a nonProfit
Charites that provide Coats for kids All Year
Round, this is a nonProfit Charite Foundation.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

President of the foundation INC

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: president
Debra Edmond Name and Title: _____

Address: 2634 Little Hill Cove Address: _____
apt 208
Oviedo, FL 32765

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: Sandra Freycinet Name and Title: Debra Jackson
Treasurer Director

Address: 230 Krieger Rd Address: 444 Los Altos Way
APT 7 APT 302
Sanford, FL 32773 Altamonte Spring, 32714

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TALLAHASSEE FLORIDA

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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: Debra Edmonds
 Address: 2634 Little Hill Cove #208
Oviedo, FL 32765

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TALLAHASSEE, FLORIDA

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Debra Edmonds
 Address: 2634 LITTLE HILL COVE
Oviedo, FL 32765

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

Debra Edmonds
 Required Signature of Registered Agent

8-5-15
 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.

Debra Edmonds
 Required Signature of Incorporator

8-5-15
 Date



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 21, 2015

DEBRA EDMONDS
2634 LITTLE HILL COVE
OVIDO, FL 32765

SUBJECT: GIVE A KID A COAT
Ref. Number: W15000048719

We have received your document for GIVE A KID A COAT and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 315A00015190