## N1500011200

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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## **COVER LETTER**

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

SUBJECT: The Less For	rtunate Still Matters Foundation	n	
	(PROPOSED CORP	ORATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)
Enclosed is an original a	and one (1) copy of the Ar	ticles 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:	Timothy Mosley		
	Na	ne (Printed or typed)	
	130 Ponderosa Circle	Address	_
	_		
	Midway, Fl 32343		
•	**************************************	City, State & Zip	<del></del>
	850-509-0251		
	Dayt	me Telephone number	_
	tmosley77@yahoo.com		

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

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

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

<u>ARTICLE I</u> <u>NAME</u> The name of the corporation shall be:	The Less Fortunate Still Matters Foundation INC			
ARTICLE II PRINCIPAL OFFIC				
Principal <u>street</u> addre 130 Ponderosa Circle, Midwa	ay, Fl 32343	Mailing address, if different is:		
ARTICLE III PURPOSE  The purpose for which the corporation	is organized is:vely for charitable purposes under 501(c)(3) of the Interna			
section of any future tax code, as amer				
	·			
	· · · · · · · · · · · · · · · · · · ·			
ABTICLE IV MANNED OF FLEA	CTION The manner in which the directors are elected and	As Stated		
In the by-Law				
110				
ARTICLE V INITIAL OFFICERS	S AND/OR DIRECTORS	हिल के		
Name and Title:	Name and Title:	<u> </u>		
Address	Address:			
·				
Name and Title:				
	Name and Title:			
	·			
	Audicas,	· <del></del>		
<del>-                                    </del>				

Name and Title:_	,	Name and Title:			_	
Address _		Address:			<del>_</del>	
-		·			_	
Name and Title:_		Name and Title:				
Address						
_						
	<u>REGISTERED AGENT</u> prida street address (P.O. Box NOT acce	cotable) of the registered	l agent is:			
Name:	Heather Mosley	parents of the registered	,			
Address:	130 Ponderosa Circle					
Address.	Midway, Fl 32343	<del></del>		5₹ca	رب بر	
The name and ad	INCORPORATOR  dress of the Incorporator is:  Timothy Mosley				15 NOV 20 P	
Name: Address:	130 Ponderosa Circle	<del></del>		Strict H3		
Address:	Midway, FL 32343					
Effective date, if	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific an	ad cannot be more th	. (OPTIONAL) an five business day	s prior or 90	busin	ess days
	inserted in this block does not meet the aptive date on the Department of State's reco		ng requirements, this	date will not b	e liste	d as the
	ned as registered agent to accept service amiliar with and accept the appointment of Registered Signature of Registered	as registered agent and			e desig	nated in this
	ument and affirm that the facts stated her t of State constitutes a third degree felony			rmation subm	itted it	n a document
Judt	Required Signature of Inco	rporator	,	11/20/2015 Date	<del>,                                     </del>	<del></del>