

N1500001515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

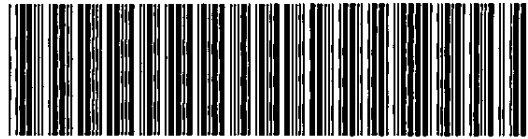
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Certified Copies _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 NOV 30 AM 11:20

12/07/15

COVER LETTER

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

SUBJECT: Trashco 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: John Wyche

Name (Printed or typed)

21113 Johnson Street, Suite 118

Address

Pembroke Pines, Florida 33029

City, State & Zip

754-200-1925

Daytime Telephone number

info@trashco.org

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: Trashco Foundation Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
21113 Johnson St, Ste 118

Pembroke Pines, FL 33029

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: exclusively for charitable, educational purposes including for such purposes
the making of distribution to the organization which qualify as exempt organization under section 501(c)3 of the Internal Revenue
Code of 1986 as amended and more specifically to receive and administer funds for charitable and educational purposes, all for
public welfare. To promote healthy responsible lifestyles, decrease homelessness and improve the quality of life
for the community at large.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: The founder shall be
the executive director of said corporation. The founder shall appoint the Board of Directors biannually.

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: _____

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SECRETARY OF STATE
JANET L. HARRIS
CORPORATIONS

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: John Wyche
Address: 21113 Johnson Street, Ste 118
Pembroke Pines, Fl 33029

ARTICLE VII INCORPORATOR

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

Name: John Wyche
Address: 21113 Johnson Street, Ste 118
Pembroke Pines, Fl 33029

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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


Required Signature of Registered Agent

11/22/15
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.


Required Signature of Incorporator

11/22/15
Date