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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

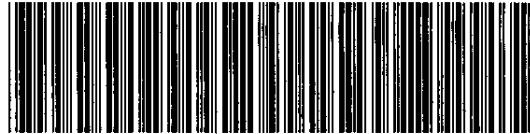
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COVER LETTER

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

SUBJECT: St. Jude Great Commission Community Development Corporation, 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: Jo Ann S. Nesbitt
Name (Printed or typed)

4526 Yarmouth Avenue South
Address

St. Petersburg, Florida 33711
City, State & Zip

727 418-1554
Daytime Telephone number

stjudgreatcommission@live.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: St. Jude Great Commission Community Development Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2012 Auburn Street South
St. Petersburg Florida 33712

Mailing address, if different is:
Post Office Box 530746
St. Petersburg, Florida 33747

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Said corporation is organized exclusively for charitable, religious, educational and scientific purposes including for such purposes , the making of distributions to organizations that qualify as exempt organizations under section 501 (c) 3 of the Internal Revenue Code, or the corresponding section of any future tax code. The specific charitable purpose of this corporation is to create opportunities that change lives, spiritually, physically, educationally, and economically through sustainable and collaborative efforts resulting in expanded economic prosperity and the alleviation of poverty in the community, to include affordable housing, higher life skill attainment, youth development, employment opportunities and entrepreneurship; and to provide such charitable services that are associated with such purpose as allowed by law.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Provided in the bylaw

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jo Ann S. Nesbitt/ President-CEO
Address: 4526 Yarmouth Avenue South
St. Petersburg, Florida 33711

Name and Title: _____
Address: _____

Name and Title: Patricia Grant/Secretary
Address: 3075 19th Avenue South
St. Petersburg, Florida 33712

Name and Title: _____
Address: _____

Name and Title: Jonathan T. Simone/Treasurer
Address: 7012 Lynwood Drive
Tampa, Florida 33637

Name and Title: _____
Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAR -3 PM 4:50
FILED

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: Jo Ann S. Nesbitt

Address: 4526 Yarmouth Avenue So.

St. Petersburg FL 33711

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ARTICLE VII INCORPORATOR

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

Name: Jo Ann S. Nesbitt

Address: 4526 Yarmouth Avenue So.

St. Petersburg FL 33711

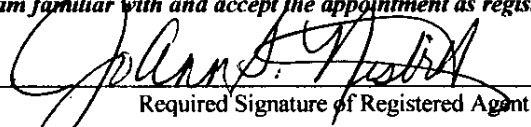
ARTICLE VIII EFFECTIVE DATE:

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.)

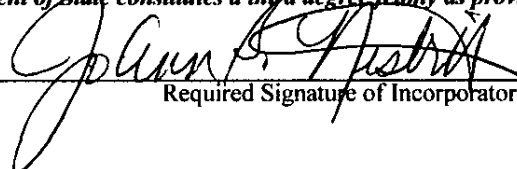
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

February 29, 2016
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

February 29, 2016
Date