

**Albany 2956**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
16 MAR 11 PM 12:10

**MAR 21 2016**

**r. SCOTT**

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

WW2ARMOR NFP Inc

**SUBJECT:** \_\_\_\_\_

(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**

*enclosed.*

FROM: Richard Cummings  
\_\_\_\_\_  
Name (Printed or typed)

901 International Pkwy, Suite 350

\_\_\_\_\_  
Address

Lake Mary, FL 32746

\_\_\_\_\_  
City, State & Zip

847-378-3330

\_\_\_\_\_  
Daytime Telephone number

richc@ben-avraham.org

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

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

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

**ARTICLE I NAME**

WW2ARMOR NFP Inc

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
1001 N SR 415

Osteen, FL 32764

Mailing address, if different is:  
128 Vista Oak Dr

Longwood, FL 32779

**ARTICLE III PURPOSE**

To to engage in any lawful act or activity for which a corporation may be  
The purpose for which the corporation is organized is:  
organized under the Florida Department of State, Division of Corporations. This corporation shall be a nonprofit corporation, and is  
organized as and at all times shall be operated exclusively for charitable, educational and scientific programs within the meaning of  
Section 501(c)(3) of the Internal Revenue Code or the corresponding section of any future federal tax code.

Upon dissolution of the corporation, its assets remaining after payment, or provision for payment, of all debts and liabilities of this  
corporation shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue  
Code or shall be distributed to the federal government, or to a state or local government, for a public purpose.

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

*election of directors shall be stated in the bylaws.*

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Robert Thomas, Director, CEO

Address: 128 Vista Oak Dr

Longwood, FL 32779

Name and Title: Lauren Thomas, Director, Treasurer

Address: 128 Vista Oak Dr

Longwood, FL 32779

Name and Title: Jeff Vosburg, Director

Address: 792 Whooping Crane Ct

Sanford, FL 32771

Name and Title: Dave Munson, Director

Address: 2541 River Tree Circle

Sanford, FL 32771

Name and Title: Rich Cummings, Director

Address: 265 Promenade Circle

Lake Mary FL 32746

Name and Title:

Address:

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DIVISION OF CORPORATIONS  
16 MAR 11 PM 12:10

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:

Richard Cummings

Name:

901 International Pkwy, Suite 350

Address:

Lake Mary, FL 32746

**ARTICLE VII INCORPORATOR**

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

Robert Thomas

Name:

128 Vista Oak Dr

Address:

Longwood, FL 32779

**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

4 March 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

04 MAR 2016  
Date