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COVER LETTER

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

PIPER'S AN UBJECT:	GELS FOUNDATION INC		
obelet.	(PROPOSED CORP	ORATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)
nclosed is an original a	nd 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:	DIANE BURNS	me (Printed or typed)	_
	11419 ORANGE GROVE B		<u>2.2</u> 432
	WEST PALM BEACH, FL	Address 33411	7 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
,		City, State & Zip	

561-793-8536

DBURNS4901@AOL.COM

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

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

Daytime Telephone number



ARTICLES OF INCORPORATION

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

ARTICLE I The name of the	NAME corporation shall be: PIPER'S ANGELS I	FOUNDATION INC	·
	PRINCIPAL OFFICE		ILED
	Principal street address: ' 51ST COURT NORTH	16 MAY Mailing address, if differen	PYSESTATE
WEST	ΓPALM BEACH, FL 33411	Costality is the	Life (LORDA
	r which the corporation is organized is:	PER'S ANGELS FOUNDATION INC IS ORGANIZATION FOR THE MAKING OF DISTRIBUTE	
	GANIZATIONS UNDER 501(C)(3) OF T	SUCH PURPOSES, THE MAKING OF DISTRIBUT ————————————————————————————————————	IONS TO QUALIFIED
		Si	EE BY-LAWS
<u>ARTICLE IV</u>	MANNER OF ELECTION The mann	ner in which the directors are elected and appointed:	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	TORS	
Name and Title	TRAVIS SUIT- PRESIDENT	Name and Title:	
Address	11157 51ST COURT NORTH	Address:	
_	WEST PALM BEACH, FL 33411		
Name and Title	SHANE POMPA- V. PRESIDENT	Name and Title:	
Address	417 GULL COURT	Address:	
_	NORTH PALM BEACH, FL 33408		
Name and Title	PAGE SANDERS-SEC/TREASURER	Name and Title:	
Address _	4608 SUNRISE BLVD	Address:	
	FORT PIERCE, FL 34982		

Name and Title:		Name and Title:		
Address		Address:		
_				
Name and Title:_		Name and Title:		
Address _		Address:		
_				
ARTICLE VI	REGISTERED AGENT			
	orida street address (P.O. Box NOT accepta	able) of the registered agent is:		
Name:	DIANE BURNS		·	,
Address:	11419 ORANGE GROVE BI	LVD	5	
	WEST PALM BEACH, FL 33	3411	-9 WH -9	
ARTICLE VII The name and ac	INCORPORATOR Idress of the Incorporator is:			
Name:	DIANE BURNS		ŞÃ 8	
Address:	11419 ORANGE GROVE BI	LVD		
	WEST PALM BEACH, FL 3	3411		
	EFFECTIVE DATE: other than the date of filing:	(OPTIONAL)		
	ate is listed, the date must be specific and	cannot be more than five business	days prior or 90 busi	ness days
	inserted in this block does not meet the appl live date on the Department of State's record		this date will not be list	ted as the
	ned as registered agent to accept service of amiliar with and accept the appointment as i			ignated in this
	Burney		*/411	
-10°CUNC	Required Signature of Registered A	gent	5/4/16 Date	
	ament and affirm that the facts stated herein t of State constitutes a third degree felony as		information submitted	in a document
()	Bus		elula.	
nua	Required Signature of Incorpo	rator	Date	

ARTICLE IX

NO PART OF THE NET EARNINGS OF THE CORPORATION SHALL INURE TO THE BENEFIT OF, OR BE DISTRIBUTED TO ITS MEMBERS, DIRECTORS OR OTHER PRIVATE PERSONS, EXCEPT AS PAY FOR REASONABLE COMPENSATION FOR SERVICES RENDERED. NO SUBSTANTIAL PART OF ACTIVITIES SHALL BE THE CARRYING OF PROPAGANDA OR OTHERWISE TO INFLUENCE LEGISLATION.

ARTICLE X

UPON DISSOLUTION OF THE CORPORATION, ASSETS 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, OR TO THE STATE OR LOCAL GOVERNMENT, FOR PUBLIC PURPOSE.