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05/23/16

COVER LETTER

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

SUBJECT: B & S HOUSE OF BREAD, CORP

(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: SOPHIA ALEXANDER

Name (Printed or typed)

2927 W. SPRUCE STREET

Address

TAMPA, FL 33607

City, State & Zip

813-784-0691

Daytime Telephone number

BNSHOUSEOFBREAD@YAHOO.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: B & S HOUSE OF BREAD, CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2927 W. SPRUCE STREET

TAMPA, FL 33607

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO CONNECT WITH OTHER COMMUNITY PARTNERS TO CREATE
LASTING SOLUTIONS TO EVERYDAY PLAGUES. OUR GOAL IS TO LESSEN / ELIMATE THE EFFECTS OF PROVERTY
BY PROVIDING BALANCED MEALS, CLOTHING AND EDUCATIONAL RESOURCES.
BY CREATING THESE PARTNERSHIPS, WE BELIEVE IT ALLOWS US TO BETTER SERVICE OUR COMMUNITIES
THROUGH ADVOCACY FOR THE HOMELESS AND THE LESS FORTUNATE. AND BY PROVIDING SERVICES TO THEM
WHICH MAY ADD LASTING AND MEANINGFUL CHANGES TO THEIR LIVES.

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

The Directors were appointed By A vote. popular vote. (SLA)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BARBARA WALKER-PRESIDENT

Address: 903 W. COLUMBUS DR
TAMPA, FL 33602

Name and Title: KIM BAKER--TREASURER

Address: 3808 CLEARFIELD
TAMPA, 33602

Name and Title: SOPHIA ALEXANDER-VICE-PRESIDE

Address: 2927 W. SPRUCE STREET
TAMPA, FL 33607

Name and Title: _____

Address: _____

Name and Title: FRANK BAILEY--SECRETARY

Address: 243 SOUTH MCMULLEN BOOTH RD
CLEARWATER, FL 33759

Name and Title: _____

Address: _____

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: SOPHIA ALEXANDER

Address: 2927 W. SPRUCE ST

TAMPA, FL 33607

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SOPHIA ALEXANDER

Address: 2927 W. SPRUCE ST

TAMPA, FL 33607

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

Sophia Alexander
Required Signature of Registered Agent

5/9/16
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.

Sophia Alexander
Required Signature of Incorporator

5/9/16
Date

FILED
SECRETARY OF STATE
TAMPA, FLORIDA
16 MAY 16 PM 3:07