

N 16000007569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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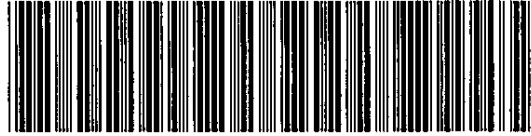
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

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8/3/16

COVER LETTER

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

SUBJECT: The Tampa 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: Jonathan Davila

Name (Printed or typed)

1616 E. Bearss Avenue

Address

Tampa, Florida 33613

City, State & Zip

813.972.5400

Daytime Telephone number

jon@diamondviewstudios.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: The Tampa Foundation Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1616 E. Bearss Avenue

Tampa, Florida 33613

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: our purpose is to educate the community by promoting, advancing, improving
and economically enhancing the area of Bearss Avenue which is bordered by I-275 to the West and Bruce B. Downs to the East
in an attempt to improve our local area by turning this strip of roadway into a true "gateway" to the University of South Florida
and a "landmark" for the City of Tampa and Hillsborough County. Notwithstanding other language (or provisions) in the creating
document, the purposes will be limited exclusively to exempt purposes within the IRC 501(c)(3). Upon dissolution, the assets will
be distributed for charitable purposes; to purposes identical to the organization; or to a governmental entity exclusively for a
public purpose.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Annual meeting

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Timothy K. Moore, Director

Address: 1616 E. Bearss Avenue
Tampa, Florida 33613

Name and Title: Jonathan Davila, Chairman

Address: 1616 E. Bearss Avenue
Tampa, Florida 33613

Name and Title: Anthony Santa, Treasurer

Address: 1616 E. Bearss Avenue
Tampa, Florida 33613

Name and Title: Jonathan Hickson, COO

Address: 1616 E. Bearss Avenue
Tampa, Florida 33613

Name and Title: Erin Cullaro, Chief Legal Officer

Address: 1616 E. Bearss Avenue
Tampa, Florida 33613

Name and Title: Jeffrey McKown, Vice-Chairman

Address: 1616 E. Bearss Avenue
Tampa, Florida 33613

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 JUL 14 AM 7:11

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: Timothy Moore
Address: 1616 E. Bearss Avenue
Tampa, Florida 33613

ARTICLE VII INCORPORATOR

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

Name: Jonathan Davila
Address: 1616 E. Bearss Avenue
Tampa, Florida 33613

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TALLAHASSEE, FLORIDA


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.

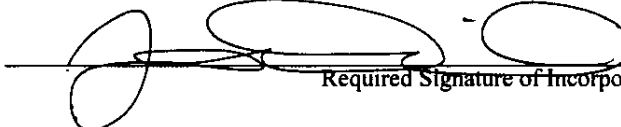
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature of Registered Agent

July 11, 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

July 11, 2016
Date