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FLORIDA

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08/07/17



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 26, 2017

ANDREW GAUSE  
P.O. BOX 146  
MARIANNA, FL 32447-0146

SUBJECT: BLUE SPRINGS ENRICHMENT, LLC  
Ref. Number: W17000061321

We have received your document for BLUE SPRINGS ENRICHMENT, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 217A00015038

# CHARLES M. WYNN LAW OFFICES, P. A.

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MARIANNA, FL 32446  
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PANAMA CITY SATELLITE  
JENKS PROFESSIONAL CENTER  
949 JENKS AVE.  
PANAMA CITY, FL 32301  
PHONE (850) 784-0132

CHARLES M. WYNN, ESQ.  
MICHAEL A. WYNN, ESQ.  
ANDREW P. GAUSE, ESQ.

August 1, 2017

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

In RE: Blue Springs Enrichment, Corp, a Not-For-Profit Corporation, Reference: W17000061321

Dear Sir or Madam

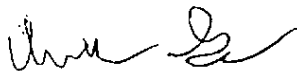
Per the request of the Division of Corporations on the correspondence dated July 26, 2017 (a copy of which is enclosed, per your request), please find the following in regards to the above referenced matter:

- The corrected Original Cover Letter, and Articles of Incorporation forms are also enclosed.
- one (1) additional copy of said Cover Letter and Articles of Incorporation, per the State of Florida instructions so that a certified copy may be returned to the corporation.
- The aforementioned copy of the corrections request.

This corporation a not-for-profit organization intended to provide educational and fellowship services to minor children and their families. If and when the organization is dissolved in the future, all assets belonging to the organization will be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future Federal Tax Code, or shall be otherwise distributed to the Federal, State, or Local Government, or otherwise shall be distributed for a public or religious purpose.

Please advise if you have any questions or concerns or if you need anything further from our office.

Sincerely yours,



Andrew P. Gause, Esq.  
APG  
enclosures

## COVER LETTER

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

**SUBJECT:** Blue Springs Enrichment, 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:** Laura Lee McDonald Coleman  
Name (Printed or typed)

5121 Menawa Trail  
Address

Marianna, Florida 32446  
City, State & Zip

(850)-209-2406  
Daytime Telephone number

Esims@tylerepafrim.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: Blue Springs Enrichment, Corp.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

2650 Lakeshore Drive

Marianna, Florida 32446

Mailing address, if different

5121 Menawa Trail

Marianna, Florida 32446

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To service Christ by providing Academic enrichment that encourages children to maximize their God-Given talents and potential, and to provide educational experiences that are an extension of the home setting and create an opportunity for families to fellowship and support each other in the Lord.

IN RE: DISSOLUTION: if and when the organization is dissolved in the future, all assets belonging to the organization will be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future Federal Tax Code, or shall otherwise be distributed to the Federal, State, or Local Government, or otherwise shall be distributed for a public or religious purpose in compliance with Section 501(c)(3)

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

Directors shall appoint replacement Directors upon the resignation of a sitting Director.

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

Name and Title: Pres/Sec Laura Lee McDonalld Coleman Name and Title: Treasurer- Leslie Elaine Sims

Address: 5121 Menawa Trail Address: 5056 Pondview Loop

Marianna, Florida 32446 Marianna, Florida 32448

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ 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: Leslie Elaine Sims

Address: 2650 Lakeshore Drive  
Marianna, Florida 32446

**ARTICLE VII INCORPORATOR**

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

Name: Laura Lee McDonald Coleman

Address: 5121 Menawa Trail  
Marianna, Florida 32446

**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 days prior or 90 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*

Leslie Elaine Sims  
Required Signature of Registered Agent

07-17-2017  
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.*

Laura Lee McDonald Coleman  
Required Signature of Incorporator

07-17-2017  
Date

17 AUG - 7 PM 4:31  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA