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(Requestor's Name)
(Address)
(Address)
(in the state of
(City/State/Zip/Phone #)
(City/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

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

SUBJECT:	Erik's Tri-Legacy Fund, Inc.		
	(PROPOSED CORP	ORATE NAME - <u>MUST INC</u>	CLUDE SUFFIX)
Enclosed is an original a	and 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 COPY REQUIRED	
FROM:	Daniel N. Stumpf		
PROM.	Na	me (Printed or typed)	-
	1828 Kettering Trace		_
		Address	-
	Brentwood, TN 37027		

703-399-6325

erikstumpflegacy@gmail.com

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

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

City, State & Zip

Daytime Telephone number

ARTICLES OF INCORPORATION

•		ES OF INCORP with Chapter 617, F.S.	·-		17 D	
ARTICLE 1 NAME The name of the corporation shall be: Erik's Tri-Legacy Fund, Inc.					EC II	:
ARTICLE II	PRINCIPAL OFFICE		ì	μ ι. :	A	Ti
1625	Principal <u>street</u> address: Shadowmoss Circle	182	Mailing address, if different is: 8 Kettering Trace	FLORIE		
Lake	Mary, FL, 32746	Bre				
	PURPOSE To which the corporation is organized is: se the length and quality of life for those is		aith based organizations and other cha			inds
other individua	ds, initiatives and organizations that suppo	ort the mind, body o	or soul.			
						
ARTICLE IV	MANNER OF ELECTION The man	ner in which the dire	Elected ctors are elected and appointed:	d by b	pard	
ARTICLE V	INITIAL OFFICERS AND/OR DIREC	<u>TORS</u>				
Address	Amy Stumpf - Chairman & Officer	Name and Title	Daniel Stumpf - Member & Officer	_		
	1625 Shadowmoss Circle	Address:	1828 Kettering Trace			
	Lake Mary, FL 32746		Brentwood, TN 37027			
None and Tiele	David Stumpf - Member	Nome can I Wills	Donna J. Stumpf - Member	_		
Address	6320 Davidson Road	Name and Title	2091 Crestview Way			
	Olive Branch, MS 38654	Address:	Naples, FL 34119	<u> </u>		
V 100-1				_		
	:					
Address		Address:		_		
		<u> </u>				

Name and Title:_		Name and Title:	
Address		Address:	
_			
Name and Title:_		Name and Title:	
Address		Address:	
_	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	REGISTERED AGENT orida street address (P.O. Box NO T	accompletely of the good assumed assumed	a ion
Name:	Amy Stumpf	acceptable) of the registered ager	it is.
	1625 Shadowmoss Circle		
Address:	Lake Mary, FL 32746		
The <u>name and ad</u> Name:	INCORPORATOR dress of the Incorporator is: Daniel Stumpf 1828 Kettering Trace		
Address:	Brentwood, TN 37027	·	
Effective date, if	other than the date of filing:	y 1, 2018 ic and cannot be more than fiv	FIONAL) re days prior or 90 days after the filing.)
	inserted in this block does not meet the date on the Department of State's		uirements, this date will not be listed as the
Having been nan certificate. Law fi	ned as registered agent to accept ser nmilia with and accept the appointm	vice of process for the above st ent as registered agent and agree	ated corporation at the place designated in this e to act in this capacity
Jun S	nox		11/24/2017
	Required Signature of Regis		Date
	ment and affirm that the facts stated of State constitutes a third degree fe		t any false information submitted in a documen f,FS .
			11/24/2017
	Required Signature of I	Incorporator	Date
Daniel	Sharp for		