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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D O'KEEFE

FEB 09 2018

## COVER LETTER

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

**SUBJECT:** Ian Supra Memorial Scholarship, 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:** Christopher Supra

\_\_\_\_\_  
Name (Printed or typed)

8539 Clematis Lane

\_\_\_\_\_  
Address

Orlando, FL 32819

\_\_\_\_\_  
City, State & Zip

407-716-1236

\_\_\_\_\_  
Daytime Telephone number

Chris.Supra@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: Ian Supra Memorial Scholarship, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
8539 Clematis Lane

Orlando, FL 32819

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Dr. Phillips High School - Ian Supra Memorial Scholarship

Purpose: Provide Financial Assistance in the form of a scholarship in the amount of \$1,000 to a graduating senior who best demonstrates qualities of moral values, leadership, personal character and a commitment to performing acts of service through Dr. Phillips High School or the local community to helping others.

Eligibility: Graduating senior / Written essay describing their motive behind their idea to help others / Expected outcome of their efforts / 2 letters of recommendations - 1 from a school official and another from a local business or personal associate attesting to the persons character and commitment to helping others

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

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

Name and Title: Christopher Supra - Director

Address 8539 Clematis Lane  
Orlando, FL 32819

Name and Title: Raphael Disla - Officer

Address: 10137 Eastmar Commons Blvd  
Orlando, FL 32825

Name and Title: Elizabeth Johnson - Officer

Address 17 Stonebridge Lane  
Pittsford, NY 14534

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

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

Name and Title: Joyce Molloy - Officer

Address 19805 Shirling Lane  
Lewes, DE 19958

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

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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: Christopher Supra  
Address: 8539 Clematis Lane  
Orlando, FL 32819

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**ARTICLE VII INCORPORATOR**

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

Name: Christopher Supra  
Address: 8539 Clematis Lane  
Orlando, FL 32819

**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*

Christopher Supra

Required Signature of Registered Agent

02/01/2018

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.*

Christopher Supra

Required Signature of Incorporator

02/01/2018

Date

Christopher Supra

2/1/2018