

11800010306

(Requestor's Name)

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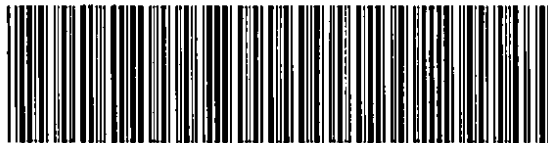
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1180007643

SEP 26 2018

T. SCOTT



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 28, 2018

SUE LORENZINI
3926 LAKESIDE LANE SE
PALM BAY, FL 32909

SUBJECT: KURT & SUE LORENZINI FOUNDATION INC.
Ref. Number: W18000077643

We have received your document for KURT & SUE LORENZINI FOUNDATION INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please list the complete principal office address.

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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 618A00017828

ATTN TYRONE SCOTT www.sunbiz.org

Division of Corporations, P.O. BOX 6227, Tallahassee, Florida 32314

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S.. (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Kurt & Sue Lorenzini Foundation Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1460 Baytree Dr NE Suite B

Mailing address, if different is:

Palm Bay, FL.
32905

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To raise money to donate to local charities

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TALLAHASSEE, FLORIDA

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

Appointed

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sue Lorenzini - President

Address: 3926 Lakeside Lane SE
Palm Bay, FL. 32909

Name and Title: Angelina Cookson - VP

Address: 294 Titan Rd SE
Palm Bay, FL. 32909

Name and Title: Craig Lorenzini - CFO

Address: 451 Hansare St SW
Palm Bay, FL. 32908

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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: Craig Lorenzini
Address: 1460 Baytree Dr. NE Suite B
Palm Bay, FL. 30905

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Craig Lorenzini
Address: 1460 Baytree Dr. NE Suite B
Palm Bay, FL. 32905

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

Required Signature of Registered Agent
8/21/18
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
8/21/18
Date