

N19000007307

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(City/State/Zip/Phone #)

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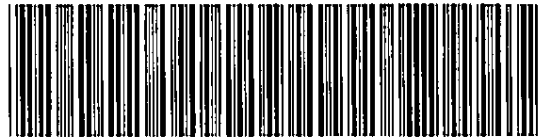
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2019 JUL 18 PM 4: 09

SECRETARY OF STATE
TALLAHASSEE, FL

N CULLIGAN

JUL 18 2019

COVER LETTER

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

SUBJECT: Volusia Proud 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: Raymond L. Schumann, Esq.
Name (Printed or typed)

149 S. Ridgewood Ave.
Address

Daytona Beach, FL 32114
City, State & Zip

386-255-8171
Daytime Telephone number

ray.schumann@cobbcole.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2019 JUL 13 PM 12:35

June 19, 2019

RAYMOND L. SCHUMANN ESQ.
149 S RIDGEWOOD AVENUE
SUITE 700
DAYTONA BEACH, FL 32114

SUBJECT: VOLUSIA PROUD FOUNDATION INC.
Ref. Number: W19000050878

We have received your document for VOLUSIA PROUD FOUNDATION INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

List the address of the directors.

Please return 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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 619A00010628

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

ARTICLE I NAME

The name of the corporation shall be: Volusia Proud Foundation, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
149 S. Ridgewood Ave, Suite 700
Daytona Beach, FL 32114

Mailing address, if different is:

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SECRETARY OF STATE
TALLAHASSEE, FL

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any Legal Purpose; for
Development & Support of Community based
programs; EVENTS AND CONCEPTS

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: <u>Raymond Schumann, Director</u>	Name and Title: <u>Melody Lankford, Director</u>
Address: <u>149 S. Ridgewood Ave, Suite 700</u>	Address: <u>149 S. Ridgewood Ave, Suite 700</u>
<u>DAYTONA BEACH, FL 32114</u>	<u>DAYTONA BEACH FL</u>
	<u>32114</u>

Name and Title: <u>Ken Phelps, Director</u>	Name and Title: <u>Genzalo Aida Brescia, Director</u>
Address: <u>149 S. Ridgewood Ave</u>	Address: <u>149 S. Ridgewood Ave</u>
<u>SUITE 700</u>	<u>SUITE 700</u>
<u>DAYTONA BEACH FL 32114</u>	<u>DAYTONA BEACH FL 32114</u>

Name and Title: <u>Cory Patterson, Director</u>	Name and Title: <u>Vincent Sagramo, Director</u>
Address: <u>149 S. Ridgewood Ave</u>	Address: <u>149 S. Ridgewood Ave</u>
<u>Suite 700</u>	<u>SUITE 700</u>
<u>DAYTONA BEACH FL 32114</u>	<u>DAYTONA BEACH FL 32114</u>

Name and Title: Stephanie A. Miller, Director

Address: 149 S. Ridgewood Ave
SUITE 700
Daytona Beach FL

Name and Title: Zina Graw, Director

Address: 149 S. Ridgewood Ave.
SUITE 700
Daytona Beach FL 32114

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: Raymond L. Schumann, Esq.
Address: 149 S. Ridgewood Ave, Suite 700
Daytona Beach, FL 32114

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Raymond L. Schumann, Esq.
Address: 149 S. Ridgewood Ave, Suite 700
Daytona Beach, FL 32114

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TALLAHASSEE, FL

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 5/8/19 (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

[Signature]
Required Signature of Registered Agent

7.3.19
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.

[Signature]
Required Signature of Incorporator

7.3.19
Date