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FLORIDA PROFIT/NON PROFIT CORPORATION
SCI. Foundation, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

JAN 22 2020

T. SCOTT

2020 JAN 21 PM 4:52

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

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COVER LETTER

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

SUBJECT: SCL 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: Cheyenne Moseley, LegalZoom.com, Inc.

Name (Printed or typed)

101 N. Brand Blvd., 10th Floor

Address

Glendale, CA 91203

City, State & Zip

323.962.8600 x 7625

Daytime Telephone number

onlinefilings@Legalzoom.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: SCL Foundation, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
11916 Five Waters Cir

Fort Myers, FL 33913

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: A advocacy group for families that will bring them together.

The website: www.savannahslegacy.com. To restore family relationship through healthy and private support

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: The method by
which the directors of the corporation are elected or appointed will be stated in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Savannah Hastings, P, D

Address: 11916 Five Waters Cir
Fort Myers, FL 33913

Name and Title: Pauline Sirt, T, D

Address: 11916 Five Waters Cir
Fort Myers, FL 33913

Name and Title: Tiffany Giannola, S, D

Address: 11916 Five Waters Cir
Fort Myers, FL 33913

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

2020 JAN 21 PM 12:00

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: United States Corporation Agents, Inc. _____

Address: 5575 S. Semoran Blvd., Suite 36 _____
Orlando, FL 32822 _____**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Cheyenne Moseley, Legalzoom.com, Inc. _____

Address: 101 N. Brand Blvd. 11th Floor _____
Glendale, CA 91203 _____**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 business days prior or 90 business 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_____
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_____
Date