# N2000000009

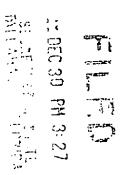
| (                    | Requestor's Name)    |           |
|----------------------|----------------------|-----------|
| (                    | Address)             |           |
| (                    | Address)             | _         |
| (                    | City/State/Zip/Phone | #)        |
| PICK-UP              | ☐ WAIT               | MAIL      |
| . (                  | Business Entity Nam  | ne)       |
| (                    | Document Number)     |           |
| Certified Copies     | Certificates         | of Status |
| Special Instructions | to Filing Officer:   |           |
|                      |                      |           |
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Office Use Only



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# **COVER LETTER**

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

|                     | (PROPOSED CORP                             | ORATE NAME – <u>MUST IN</u>         | CLUDE SUFFIX)                                  |
|---------------------|--|-------------------------------------|--|
| osed is an original | and one (1) copy of the Ar                 | ticles of Incorporation and         | a check for :                                  |
| S70.00 Filing Fee   | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy | S87.50 Filing Fee, Certified Cop & Certificate |
|                     |  | ADDITIONAL CO                       | PY REQUIRED                                    |

P.O. Box 772128

(407) 929-8400

Orlando, Florida 32877

orlandomeimei@gmail.com
E-mail address: (to be used for future annual report notification)

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

Address

City, State & Zip

Daytime Telephone number

# ARTICLES OF INCORPORATION

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

| ARTICLE I The name of the   | NAME he corporation shall be:   | enior Housing Inc  |
|---|---|--|
| ARTICLE II  |   | <del>-</del>   |
| 5026  | Principal <u>street</u> address:<br>6 Tideview Cir #16  | Mailing address, if different is: P.O. Box 772128                          |
| Orla  | ando, FL 32819  | Orlando, Florida 32877   |
| The purpose f<br>and can live i                                       | independently.  | to provide a home for seniors where they are respected, well taken care of |
|   |   | itable, religious, educational and scientific purposes, including for such |
| purposes, the   | making of distributions to organizati   | ons that qualify as an exempt organization under section 501(c)(3) of the  |
| Internal Reve   | enue Code, or the corresponding secti   | on of any future federal tax code.   |
|   | MANNER OF ELECTION The in the bylaws  | e manner in which the directors are elected and appointed:                 |
| As set forth  | in the bylaws  INITIAL OFFICERS AND/OR D  |  |
| ARTICLE IV As set forth  ARTICLE V  Name and Tit                      | INITIAL OFFICERS AND/OR E  Mei Leung. President   |  |
| As set forth  ARTICLE V  Name and Tit                                 | INITIAL OFFICERS AND/OR E   | DIRECTORS  |
| As set forth  ARTICLE V  Name and Tit  Address                        | INITIAL OFFICERS AND/OR D  Mei Leung, President  5026 Tideview Cir #16  Orlando, FL 32819  Bea Akman, Treasurer   | DIRECTORS  Name and Title:   |
| As set forth  ARTICLE V  Name and Tit  Address                        | INITIAL OFFICERS AND/OR D  Mei Leung. President  5026 Tideview Cir #16  Orlando, FL 32819  Bea Akman, Treasurer  1291 Newfound Harbor Dr  | Name and Title:  Address:  |
| As set forth  ARTICLE V  Name and Tit  Address                        | INITIAL OFFICERS AND/OR D  Mei Leung. President  5026 Tideview Cir #16  Orlando, FL 32819  Bea Akman, Treasurer  1291 Newfound Harbor Dr  | Name and Title:  Address:  Name and Title:                                 |
| As set forth  ARTICLE V  Name and Tit  Address  Name and Tit  Address | INITIAL OFFICERS AND/OR E  Mei Leung, President  5026 Tideview Cir #16  Orlando, FL 32819  Bea Akman, Treasurer  1291 Newfound Harbor Dr  Merritt Island, FL 32952  | Name and Title:  Address:  Name and Title:                                 |
| As set forth  ARTICLE V  Name and Tit  Address  Name and Tit  Address | INITIAL OFFICERS AND/OR E  Mei Leung, President  5026 Tideview Cir #16  Orlando, FL 32819  Bea Akman, Treasurer  1291 Newfound Harbor Dr  Merritt Island, FL 32952  Reie: Kip Echols, Secretary  92 Gordon Dr | Name and Title: Address:  Name and Title: Address:                         |

### Affordable Senior Housing Inc Articles of Incorporation Attachment

## ARTICLE IX- ADDITIONAL PROVISIONS

No part of the net earnings of the organization shall inure to the benefit of, or be distributed to its members, trustees, officers, or other private persons, except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the purpose clause hereof. No substantial part of the activities of the corporation shall consist of the carrying on of propaganda or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in, any political campaign on behalf of any candidate for public office. Notwithstanding any other provision of this document, the organization shall not carry on any other purposes not permitted to be carried on (a) by an organization exempt from federal income tax under section 501(c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or (b) by an organization, contributions to which are deductible under section 170(c) (2) of the Internal Revenue Code, or corresponding section of any future federal tax code.

The property of this corporation is irrevocably dedicated to charitable purposes and no part of the net income or assets of this corporation shall ever inure to the benefit of any director, officer or member thereof or to the benefit of any private person.

Upon dissolution of the Corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or state or local government for public purpose. Any such asset not so disposed of shall be disposed of by the Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purpose or to such organization or organizations as said Court shall determine, which are organized and operated exclusively for such purposes.

| Name and Title                   | · · · · · · · · · · · · · · · · · · ·  | Name and Title:  |                                       |
|----------------------------------|--|--|---------------------------------------|
| ddress                           |  | Address:   |                                       |
|                                  |  |  |                                       |
| ame and Title                    | :  |  | ·                                     |
| ddress                           |  | Address  |                                       |
| adics                            |  | Address.   |                                       |
| D. T. C. I. V.                   |  |  |                                       |
| RTICLE VI<br>he name and         | <u>REGISTERED AGENT</u><br>Florida street address (P.O. Box NOT acc                          | ceptable) of the registered agent is:  |                                       |
| Name:                            | Mei Leung  |  |                                       |
| Name:<br>Address:                | 5026 Tideview Cir #16  | <del></del>  |                                       |
| vaaress:                         | Orlando, FL 32819  |  |                                       |
|                                  | INCORPORATOR address of the Incorporator is: Mei Leung                                       |  |                                       |
| Address:                         | 5026 Tideview Cir #16  |  |                                       |
|                                  | Orlando, FL 32819  |  |                                       |
| ffective date,<br>f an effective | EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be specific: | (OPTIONAL)   |                                       |
|                                  | te inserted in this block does not meet the ective date on the Department of State's re      |  | , this date will not be listed as the |
|                                  |  |  |                                       |
|                                  | amed as registered agent to accept service familiar with and accept the appointment          |  | this capacity                         |
|                                  | familiar with and accept the appointment   | t as registered agent and agree to act in  | this capacity                         |
| ertificate, I am                 | Required Signature of Registers  | t as registered agent and agree to act in  | this capacity                         |
| ertificate, I am                 | familiar with and accept the appointment   | t as registered agent and agree to act in  cd Agent  erein are true. I am aware that any fals  | this capacity                         |
| ertificate, I am                 | Required Signature of Registers  | t as registered agent and agree to act in  ed Agent  erein are true. I am aware that any fals  ny as provided for in s.817.155, F.S. | this capacity                         |