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

| The name of the corporation shall be: | en Guardians, Inc. | | |
|---|--|-------------|----------------|
| ARTICLE II PRINCIPAL OFFICE | | | |
| Principal street address: 2918 Pound Drive | Mailing address, if different is: | | |
| Tallahassee, FZ 32. | 312 | | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: COUCH DO SOMMED. | to provide assistance and | | - - |
| | | | - - - |
| | | | - |
| | nner in which the directors are elected and appointed: | | |
| ARTICLE V INITIAL OFFICERS AND/OR DIREC | CTORS | | |
| Name and Title: | Name and Title: | | |
| Address | Address: | | |
| | | 20 MA | OISI/AC |
| Name and Title: | Name and Title: | х — | 교육 유동 |
| Address | |) PH | OF CORPORATION |
| | | ų: 03 | (<u>원</u>) |
| | Name and Title: | • | * |
| Address | | | |
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| Name and Title: | Name and Title: |
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| | Address: |
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| Name and Title: | Name and Title: |
| | Address: |
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| | |
| APTICLE VI DECUTEDED AND TO | |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. | . Box NOT acceptable) of the registered agent is: |
| Name: Natalia (| holden |
| Address: 2918 Poun | d Drive |
| Tallahasi | ee, Ft 32312 |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator i | a. |
| . 1 | iolden |
| Address: 2918 Pour | nd Deive |
| Tallahas | see, FZ 32312 |
| ARTICLE VIII EFFECTIVE DATE: | · |
| (If an effective date is listed, the date must | g: |
| <u>Note:</u> If the date inserted in this block does document's effective date on the Department | s not meet the applicable statutory filing requirements, this date will not be listed as the nt 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 | uppointment as registered agent and agree to act in this capacity |
| A Calle A Colored Signature | $\frac{00}{\text{cr of Registered Agent}} = \frac{03/24/2020}{\text{Odds}}$ |
| I submit this document and affirm that the fa | acts stated herein are true. I am aware that any false information submitted in a document to |
| one repuriment of state constanter withird d | egree felony as provided for in s.817.155, F.S. |
| Middle Required Sig | nature of Incorporator Date Date |