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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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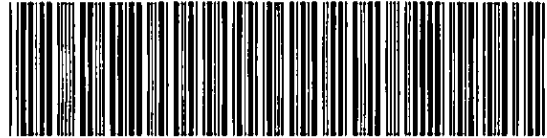
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: HEART TO GIVE, 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: Tamara Togina Burton

Name (Printed or typed)

6473 Cherry Grove Circle

Address

Orlando, FL 32809

City, State & Zip

(407) 580-6034

Daytime Telephone number

hearttogive322@gmail.com

E-mail address: (to be used for future annual report notification)

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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: Heart to Give, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
6473 Cherry Grove Circle

Orlando, FL 32809

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Corporation is organized and operated exclusively for charitable
religious, educational and scientific purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code or corresponding
sections of any future tax code(s). Upon dissolution of the corporation, assets shall be distributed for one or more exempt purposes
within the meaning of Section 501(c) of the Internal Revenue Code, or corresponding sections of any future tax code(s), or shall be
distributed to the federal government, or to the state or local government for a public purpose.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Directors are nominated
and a majority vote required of members present at the annual election meeting.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Letitia Shepherd-Spencer, President

Address: 6473 Cherry Grove Circle

Orlando, FL 32809

Orlando, FL 32809

Name and Title: Patricia Hylick, Vice President

Address: 6473 Cherry Grove Circle

Orlando, FL 32809

Orlando, FL 32809

Name and Title: Cassandra Mathis, Secretary

Address: 6473 Cherry Grove Circle

Orlando, FL 32809

Name and Title: Andrena Daniels, Treasurer

Address: 6473 Cherry Grove Circle

Orlando, FL 32809

Name and Title: Tamara Togina Burton, CEO

Address: 6473 Cherry Grove Circle

Orlando, FL 32809

Name and Title: _____

Address: _____

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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: Tamara Togina Burton

Address: 6473 Cherry Grove Circle

Orlando, FL 32809

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Tamara Togina Burton

Address: 6473 Cherry Grove Circle

Orlando, FL 32809

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

Tamara Togina Burton
Required Signature of Registered Agent

1/20/2021
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.

Tamara Togina Burton
Required Signature of Incorporator

1/20/2021
Date