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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Business Chity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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2021 HOV - I AM ID: II

Office Use Only



COVER LETTER

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

lis an original a			
r is air original a	nd one (1) copy of the Ar	ticles 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 CO	PY REQUIRED
FROM:	Emma Clements		
	7548 Plum Street	une (Printed or typed)	TOMOTIS TIVIL
		Address	_
	New Orleans, LA 70118	City, State & Zip	_
	504-952-5440		
		time Telephone number	_

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 The name of t	<u>NAME</u> he corporation shall be: Five Star Neighb	sors United Foundation Inc.			
ARTICLE II	PRINCIPAL OFFICE				
27(8	Principal <u>street</u> address:) Westhall Lane Suite 137	Mailing address, if different is:			
Mair	tland, FL 32751		-		
The purpose or scientific p	I PURPOSE for which the corporation is organized is purposes under Section 501(c)(3) of the	The corporation is organized exclusively for charitable, religing the content of the corporation of the corp	ious, educational,		
	· · · · · · · · · · · · · · · · · · ·				
					
		· · · · · · · · · · · · · · · · · ·			
ARTICLE V	INITIAL OFFICERS AND/OR DIR	RECTORS RECTORS	A D		
Name and Ti	Nigel Bogaert tle:	Name and Title:	<u> </u>		
Address	President	Address:	_		
	2700 Westhall Lane Suite 137		_		
	Maitland, FL 32751		_		
Name and Ti	Brian Macomber tle:	Name and Title:	_		
Address	Treasurer	Address:	<u></u>		
	2700 Westhall Lane Suite 137		_		
	Maitland, FL 32751				
Name and Ti	tle: John Blum	Name and Title:	_		
Address	Secretary				
radicss	2700 Westhall Lane Suite 137		_		
	Maitland, FL 32751		_		

Name and Title	·	Name and Title:	
Address		Address:	
			
Name and Title		Name and Title:	
Address			
Address			
			
		<u> </u>	
ARTICLE YI	REGISTERED AGENT		
The <u>name and</u>	Florida street address (P.O. Box NOT a	ecceptable) of the registered agent is:	
Nume:	Nigel Bogaert		
Address:	2700 Westhalf Lane Suite 137		
	Maitland, FL 32751		
			202
ARTICLE VII	INCORPORATOR		2021 NOV
	address of the Incorporator is:		Y
Name:	Nigel Bogaert		The same of the sa
	2700 Westhall Lane Suite 137		
Address:	Maitland, FL 32751		A TO
CDTIZE E WI	I EFFECTIVE WATE.		• •
	I EFFECTIVE DATE: if other than the date of filing:	(OPTIONAL)	
(If an effective	e date is listed, the date must be specifi	ic and cannot be more than five days prior or	90 days after the filing.)
	ate inserted in this block does not meet the Tective date on the Department of State's	ne applicable statutory filing requirements, this direcords.	ate will not be listed as the
		vice of process for the above stated corporation int as registered agent and agree to act in this cap	
			21/2021
	Required Signature of Registo		Date
	· •	_	
	ocument and affirm that the facts stated h t of State constitutes a third degree felon	verein are true. I am aware that any false informa y as provided for in s.817.155, F.S.	uon submittea in a document t
•	, , , , ,		21/2021
	Required Signature of In		Date
		to a contract to the contract	

Article IX- Other Provisions

DISSOLUTION

Upon the dissolution of this 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 corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

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