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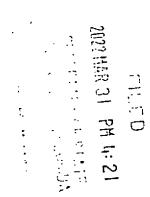
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COVER LETTER

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

SUBJECT:	(PROPOSED CORPO	ORATE NAME – <u>MŪST IN</u>	CĹUDE SUFFIX)
nclosed is an original a	and one (1) copy of the Art	icles of Incorporation and	a check for:
□ \$70.00 Filing Fee	☐ S78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	ANNETTE LIZARDO	ne (Printed or typed)	_
	120 S. WOODLAND BLVD	Suite #200 Address	
	DELAND, FL 32720	City, State & Zip	- : : : : : : : : : : : : : : : : : : :
	305-546-8163	me Telephone number	

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

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

LIZARDO.ESQ@GMAIL.COM

ARTICLES OF INCORPORATION for VOLUSIA SCHOOL FOR AUTISM

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

ARTICLE I. NAME.

The name of the corporation shall be VOLUSIA SCHOOL FOR AUTISM, INC., hereinafter referred to as "Corporation" or "VSFA."

ARTICLE II. PRINCIPAL OFFICE.

Principal Street Address:

120 S. WOODLAND BLVD., Suite # 200

<u>DELAND</u>, F<u>L 327</u>30

Mailing address, is the same.

ARTICLE IIIA, PURPOSE.

The purposes for which this Corporation is formed are as follows:

VOLUSIA SCHOOL FOR AUTISM, INC., is a not-for-profit educational organization providing individuals on the autism spectrum and/or with speech-language impairment specialized education using innovative and varied modalities of instruction and alternative communication to develop or improve capabilities, including teaching, specialized tutoring, educational therapy, individualized academic support and small class sizes with low teacher-student ratios to foster academic and holistic success in students from elementary to high school and beyond (K-22+) in a nurturing environment that cultivates Judeo-Christian character traits that help develop good citizenship; said corporation is organized exclusively for educational purposes.

ARTICLE HIB, DEDICATION OF ASSETS.

The properties and assets of this not-for-profit Corporation, VOLUSIA SCHOOL FOR AUTISM, INC., are irrevocably dedicated to educational purposes. No part of the net earnings, properties, or assets of this Corporation, on dissolution or otherwise, shall inure to the benefit of any private person or individual, or any member, director or officer of this Corporation. On liquidation or dissolution, all properties and assets, and obligations if any, shall be distributed and

paid over to an organization dedicated to similar charitable, religious and/or educational purposes, which has established its tax-exempt status under Internal Revenue Code Section 501(c)(3).

ARTICLE IV. MANNER OF ELECTION.

The manner in which the directors are elected and appointed are as specified in the Corporation's Bylaws.

ARTICLE V. INITIAL OFFICERS AND/OR DIRECTORS.

Name and Title: ANNETTE SANJURJO LIZARDO, PRESIDENT

Address: 120 S. WOODLAND BLVD., DELAND, FL 32720 Suite 200

Name and Title: <u>ALICE BARRY, VICE PRESIDENT</u>

Address: 120 S. WOODLAND BLVD., DELAND, FL 32720

Name and Title: BARBARA BEASLEY, SECRETARY

Address: ____ 120 S. WOODLAND BLVD., DELAND, FL 32720

Name and Title: <u>EMILY ASHWORTH HAMILTON, TREASURER</u>

Address: 120 S. WOODLAND BLVD., DELAND, FL 32720

Name and Title: RACHEL ARAZASHVILL

Address: 120 S. WOODLAND BLVD., DELAND, FL 32720

Name and Title: MARGARITA AVILA GONZALEZ

Address: 120 S. WOODLAND BLVD., DELAND, FL 32720

Name and Title: **EMM LAZOTT**

Address: 120 S. WOODLAND BLVD., DELAND, FL 32720

2022 HAR 31 PH 4: 21

Name and Title: COURTNEY CHISHOLM

Address: 120 S. WOODLAND BLVD., DELAND, FL 32720

ARTICLE VI. REGISTERED AGENT.

Name: ANNETTE SANJURJO, ESQ.

Address: 120 S. Woodland Blvd., DeLand, FL 32720.

Suite 200

ARTICLE VII. INCORPORATOR.

Name: ANNETTE LIZARDO

Address: 120 S. WOODLAND BLVD., DELAND, FL 32720.

ARTICLE VIII. EFFECTIVE DATE.

The effective date for the Corporation will be 03/21/2022.

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.

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 in a document to the Department of State constitutes a third degree felony as provided in s.817.155, F.S.

Date

03/21/2022

Signature of Incorporator