NZZOQ	013114
(Requestor's Name) (Address)	
(Address) (City/State/Zip/Phone #)	000389833000 Willst
(Business Entity Name) (Document Number)	SECRETARY OF STATE TALLAHASSEE, FL
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Office Use Only	

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

<u>ARTICLE1</u> The name of the	<u>NAME</u> e corporation shall be:	Community Partnership	Foundation, Inc.		
	PRINCIPAL OFFICE				
115	Principal <u>street</u> address: 7. Adams Street		Mailing address, if different is:		
	nassee, Florida 32301	·····		· · · · · · · · · · · · · · · · · · ·	
1 (UI(U 					
<u>ARTICLE III</u>					
	or which the corporation is organized				
<del></del>	munity empowerment opportunity, c				
communities s	eeking better mental health, wellness	and socio mobility; esp	ecially in communities where Kingdo	om Life Prepatory	
Academy pare	nts live and work.			,	
	<b></b>		<u></u>		
<u> </u>					
			ectors are elected and appointed:		
<u>ARTICLE IV</u>	<u>MANNER OF ELECTION</u> The	e manner in which the dire	ectors are elected and appointed:		
				_	
ARTICLE V	INITIAL OFFICERS AND/OR D	IRECTORS			
Name and Title	Nitika Fryson (Board Chair)		Patricia A. Johnson (Secretary)		
Address	2006 Alton Drive	Address:	8270 Sierra Woods Drive		
	Tallahassee, Florida 32303	<u> </u>	Tallahassee, Florida 32311		
Name and Title	Dana Dudley (Treasuer)	Name and Title			
	1028 F. Park Avenue	Address		202	
Address	Tallahassee, FL 32301	Autress		· · · · · ·	
Name and Title			۲۵۵۰ ۱۳۵۵ ۱۳۳۱ - ۲۰۰۰ ۵۰۳۱ - ۲۰۰۰		
Address		Address:			

Name and Title:	Name and Tule:
Address	Address:
Name and Title:	
Address	Address:
<u>-</u>	

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:	3136 Sawtooth Drive	
Address:	Tallahassee, FL 32303	
		<del>,</del>
ARTICLE VII	INCORPORATOR	

The <u>name and a</u>	address of the Incorporator is:	
Name. Address:	Dr. Otis B. Young	
	324 N. Adams Street	
	Tallahassee, Florida 32301	

NOV 28 PM 12: 671T#341

## 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 days prior or 90 days after the filing.)

<u>Note:</u> 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

Required Signature of Registered Agent

 $\frac{1/2/2}{\text{Date}} = \frac{1}{2} \frac{1}{2}$ 

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.

Required Signature of Incorporator

<u>||-|5-2022</u> Date