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W22-59787

## COVER LETTER

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

**SUBJECT:** Florida's Non-profit Senior Services, *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:** Shereve Smith  
\_\_\_\_\_  
Name (Printed or typed)

4941 Wandering Way  
\_\_\_\_\_  
Address

Wesley Chapel, FL 33544  
\_\_\_\_\_  
City, State & Zip

813-579-8571  
\_\_\_\_\_  
Daytime Telephone number

Frenchmanoralf@gmail.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

**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: Florida's Non-profit Senior Services, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal **street** address:  
13042 Tarpon Springs Road  
Odessa, FL 33556

Mailing address, if different is:  
4941 Wandering Way  
Wesley Chapel, FL 33544

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Florida's Non-profit Senior Services wants to be at the forefront of giving back to our community by providing support and  
assistance to families in need of guidance, services, and respite for elderly and disabled family members. The Mission of Florida's  
Non-profit Senior Services is to improve and/or maintain the quality of life of seniors and individuals with disabilities, through  
addressing their physical, social, and mental needs, by providing supportive housing, meals, supervision, and assistance to ensure  
that their daily needs are met.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed:

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Darryl Adams, Chairman

Address: 9703 Sunny Isle Circle  
Tampa, FL 33647

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Cornelia Cummings, Treasurer

Address: 19401 Via Del Mar  
Tampa, FL 33647

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Sean Cummings, Chairman

Address: 4685 Tara Cove Way  
West Palm Beach, FL 33417

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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TAMPA, FL 33602

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: Shereve Smith, Chief Executive Officer  
Address: 4941 Wandering Way  
Wesley Chapel, FL 33544

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**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Shereve Smith, Chief Executive Officer  
Address: 4941 Wandering Way  
Wesley Chapel, FL 33544

**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.)

**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*

Shereve Smith  
Required Signature of Registered Agent

5/27/22  
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.*

Shereve Smith  
Required Signature of Incorporator

5/27/22  
Date