

N 23000004484

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000140654 3)))



H230001406543ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.
Account Number : I20010000062
Phone : (323)962-8600
Fax Number : (323)389-0502

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
Center for Disability Employment & Inclusion Inc.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 04 |
| Estimated Charge | \$78.75 |

RECEIVED

2023 APR 14 PM 4:56

CORPORATIONS
SPECIAL
SERVICES

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2023 APR 14 PM 1:07

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

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

SUBJECT: Center for Disability Employment & Inclusion 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: Cheyenne Moseley, Legalzoom.com, Inc.

Name (Printed or typed)

101 N Brand Blvd., 11th Flr

Address

Glendale, CA 91203

City, State & Zip

323 962-8600 ext. 9724

Daytime Telephone number

ramanagement@legalzoom.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 NAMEThe name of the corporation shall be: Center for Disability Employment & Inclusion Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address5931 International DriveOrlando, FL 32819

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: Please see attachment

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed. The method by
 which the directors of the corporation are elected or appointed will be stated in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: James W Byers IV P.DAddress: 12932 Penn Station Ct, #204Orlando, Florida 32821Name and Title: Andrew M Byers T, S, DAddress: 12932 Penn Station Ct, #204Orlando, Florida 32821Name and Title: Stephanie A Chuipok DAddress: 515 Westminster AveSwarthmore, Pennsylvania 19081

Name and Title:

Address

Name and Title: James D Williams DAddress: 515 Westminster AveSwarthmore, Pennsylvania 19081

Name and Title

Address

FILED
 2023 APR 14 PM 1:07
 CLERK OF DISTRICT COURT
 11th JUDICIAL CIRCUIT
 TALLAHASSEE, FLORIDA

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: United States Corporation Agents, Inc.
Address: 476 Riverside Ave.
Jacksonville, FL 32202

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Cheyenne Moseley, Legalzoom.com, Inc.
Address: 101 N. Brand Blvd, 11th Floor
Glendale, CA 91203

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



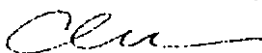
4/14/23

Required Signature of Registered Agent

Date

Cheyenne Moseley, United States Corporation Agents, Inc.

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.



4/14/23

Required Signature of Incorporator

Date

Cheyenne Moseley, Asst. Secretary, Legalzoom.com, Inc.

FILED
2023 APR 14 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA