

NA3000012932

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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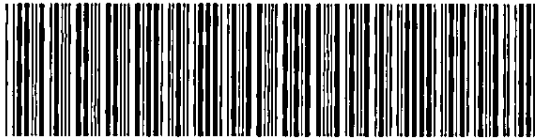
(Business Entity Name)

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2023 OCT -4 PM 6:17
SECRETARY OF STATE
TALLAHASSEE, FL

March 10/2

COVER LETTER

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

SUBJECT: Fellowship Home Residents Council 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: Thomas E. Mustio
Name (Printed or typed)
5959 Sun N Lake Blvd. Apt. A214
Address
Sebring, FL 33872
City, State & Zip
863-385-9696
Daytime Telephone number
tomaxi68@centurylink.net
E-mail address: (to be used for future annual report notification)

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

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

ARTICLE I NAME

The name of the corporation shall be: Fellowship Home Residents Council Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
5959 Sun N Lake Blvd.

Sebring, FL

33872

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Make sure that Fellowship Home does not deprive residents of any rights, benefits or privileges guaranteed by law and the Florida and United States Constitutions.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: go by By-Laws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andrey J. Walter-President

Address: 5959 Sun N Lake Blvd. A114
Sebring, FL
33872

Name and Title: Thomas E. Mustio-Trea.

Address: 5959 Sun N Lake Blvd. A214
Sebring, FL
33872

Name and Title: Alice Hansen-Sectry

Address: 5959 Sun N Lake Blvd. B 202
Sebring, FL
33872

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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SECRETARY
FELLOWSHIP HOME
RESIDENTS COUNCIL INC.

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: Thomas E. Mustio
Address: 5959 Sun N Lake Blvd., Apt. A214
Sebring, FL 33872

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Thomas E. Mustio
Address: 5959 Sun N Lake Blvd. APT. A214
Sebring, FL 33872

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

Thomas E. Mustio
Required Signature of Registered Agent

9-30-2023
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.

Thomas E. Mustio
Required Signature of Incorporator

9-30-2023
Date