

BURR KEIM CO 121597793 Fax (850) 617-6313 Page 1 of 3 12/9/2024 2:10 PM
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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : M. BURR KEIM COMPANY
Account Number : I19990000242
Phone : (215)563-8113
Fax Number : (215)977-9386

****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

Tracy and Amanda Martin Foundation, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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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: Tracy and Amanda Martin Foundation, Inc.

ARTICLE II PRINCIPAL OFFICEPrincipal street address:

2150 South Ocean Blvd, 7J

Mailing address, if different is:

Delray Beach, FL 33483

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to promote, encourage and carry on any religious, charitable, scientific, literary or educational endeavor within the meaning of section 501(c)(3) of the Internal Revenue Code of 1986. Without limiting the foregoing, the Corporation is formed more specifically to support the well-being of poor, distressed or underprivileged individuals and families and to promote social welfare by providing financial assistance, resources, and guidance to those facing adversity. The Corporation does this through financial aid, fundraising and public outreach.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: stated in the Bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tracy J. Martin, President Name and Title: Stephanie Colonna-Romano, Secretary

Address: 2150 South Ocean Blvd, 7J Address: 33 Jonquil Drive
Delray Beach, FL 33483 Newtown, PA 18940

Name and Title: Amanda Martin Name and Title:

Address: 2150 South Ocean Blvd, 7J Address:
Delray Beach, FL 33483

Name and Title: Name and Title:

Address: Address:

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Tracy J. Martin

Address: 2150 South Ocean Blvd, 7J
Delray Beach, FL 33483**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Tracy J. Martin

Address: 2150 South Ocean Blvd, 7J
Delray Beach, FL 33483**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.

Required Signature of Registered Agent

12/9/24

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.

Required Signature of Incorporator

12/9/24

Date

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