

N24000014868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

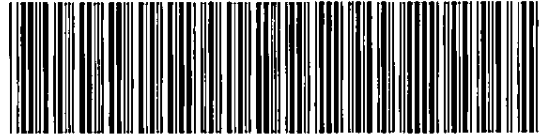
(Business Entity Name)

(Document Number)

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HARRIS COUNTY, TEXAS

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FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-54372
(850) 524-6243

Please use funds from the account 120210000160: \$78.75

Authorization Signature *Autla*

TB3 7NY Foundation Inc

Business

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___ Certificate of Status

NEW FILINGS

___ Profit
___ Not for Profit
___ LLC
___ Domestication
___X___ INC
___ CORP
___ OTHER

AMENDMENTS

___ Amendment
___ Resignation of R.A.
___ Change of Registered Agent
___ Dissolution/Withdrawal
___ Conversion
___ Statement of Authority
___ Merger
___ Amended and Restated Articles

OTHER FILINGS

___ Annual Report
___ Fictitious Name
___ Statement of Authority
___ APOSTIL
 COUNTRY

REGISTRATION/QUALIFICATIONS

___ Foreign Filing
___ Partnership
___ Reinstatement
___ Statement of CORRECTION
___ Domestication of a Foreign Corp.
___ Other

EXAMINER'S INITIALS:

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TALLAHASSEE, FL

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____ Other

EXAMINER'S INITIALS: _____

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TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: TB3 7NY Foundation 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: Jason Kung

Name (Printed or typed)

4 Centerpointe Dr #310

Address

La Palma, CA 90623

City, State & Zip

7142525822

Daytime Telephone number

mike@shoresidesupport.com

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

ARTICLE I NAME

The name of the corporation shall be: TB3 7NY Foundation Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:
441 E Dilido Drive

Miami Beach, FL 33139

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: exclusively for charitable, religious, education, and scientific purposes

including, for such purposes, the making of distributions to organizations that qualify as exempt organizations described under

Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: as provided for in the bylaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Thomas Baldwin III, President

Address: 441 E Dilido Drive

Miami Beach, FL 33139

Name and Title: Andrea Stemke, Treasurer

Address: 441 E Dilido Drive

Miami Beach, FL 33139

Name and Title: Thomas Baldwin Jr, Secretary

Address: 441 E Dilido Drive

Miami Beach, FL 33139

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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: Majek Holdings Inc
Address: 12773 Forest Hill Blvd Ste 1208
Wellington, FL 33414

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CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
MIAMI, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Thomas Baldwin III
Address: 441 E Dillido Drive
Miami Beach, FL 33139

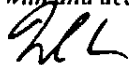
ARTICLE VIII EFFECTIVE DATE:

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

12/27/2024

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

12/27/2024

Date

ARTICLE IX SUPPLEMENTAL PROVISIONS

Upon the dissolution of the organization, its assets remaining after payment, or provision for payment, of all debts and liabilities of this organization shall be distributed to a nonprofit fund, foundation or organization which is organized and operated exclusively for charitable, religious, educational, and/or scientific purposes and which has established its tax-exempt status under Section 501(c)(3) of the Internal Revenue Code.

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