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TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: SUNRISE ACADEMY OF EXCELLENCE, 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: FUNDS TO FUNCTION LLC/ CONNIE WILLIAMS
Name (Printed or typed)

255 S. ORANGE AVE, SUITE 104 #1472
Address

ORLANDO, FL 32801
City, State & Zip

(561) 408-5136
Daytime Telephone number

CWILLIAMS@FUNDSTOFUNCTION.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: SUNRISE ACADEMY OF EXCELLENCE, INC.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address:

5200 Oleander Ave

Fort Pierce, FL 34982

Mailing address, if different is:

2022 OCT 26 P 12:41

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SEE ATTACHED

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Oveda Taylor Richard/ Founder & Pres

Address: 10930 Myrtlewood Ln

Port Saint Lucie, Fl 34986

Name and Title: Latisha Derus/ Secretary

Address: 4261 SW Savona Blvd.

Port Saint Lucie Fl 34953

Name and Title: Sheldon Telemaque/ Vice President

Address: 265 SW Pisces Terrace

Port Saint Lucie, Fl 34984

Name and Title: Lisa Cobb/ Director

Address: 11924 SW Macelli Way

Port Saint Lucie, Fl 34987

Name and Title: Gabriel Delgado/ Treasurer

Address: 11738 SW Macelli Way

Port Saint Lucie, Fl 34987

Name and Title: Megan Barron-Henry/ Director

Address: 5805 Sunset Blvd

Fort Pierce, Fl 34982

Name and Title: KeAndera Davis/ Director

Address: 2514 Mohawk Ave
Fort Pierce, Fl 34946

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: Oveda Taylor Richard/ Founder & Pres

Address: 10930 Myrtlewood Ln
Port Saint Lucie, Fl 34986

ARTICLE VII INCORPORATOR

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

Name: Oveda Taylor Richard/ Founder & Pres

Address: 10930 Myrtlewood Ln
Port Saint Lucie, Fl 34986

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

Oveda Taylor Richard
Required Signature of Registered Agent

10/21/2025
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.

Oveda Taylor Richard
Required Signature of Incorporator

10/21/2025
Date

Attachment to Articles of Incorporation for
SUNRISE ACADEMY OF EXCELLENCE, INC.

Article 3. The purposes for which Sunrise Academy of Excellence, Inc is organized are:

a. Sunrise Academy of Excellence, Inc. (SAE) is organized for exclusively religious, charitable, educational and scientific purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue Law, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under said Section 501(c)(3) of the Internal Revenue Code of 1986.

b. Notwithstanding any other provision of these Articles, this organization shall not carry on any activities not permitted to be carried on by an organization exempt from Federal Income Tax under Section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue Law or by an organization, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code, or corresponding section of any future federal tax code.

c. No substantial part of the activities of SAE shall be carrying on propaganda, or otherwise attempting to influence legislation, and the organization shall not participate in, or intervene in (including the publication or distribution of statements), any political campaign on behalf of any candidate for public office.

d. No part of the net earnings of SAE shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the purpose clause hereof.

e. Upon the dissolution of SAE, the Board of Directors shall, after paying or making provision for payment of all the liabilities of SAE, dispose of the residual assets of SAE exclusively for exempt purposes of SAE in such manner, or to one or more organizations which themselves are exempt as organizations described in Sections 501(c)(3) and 170(c)(2) of the Internal Revenue Code of 1986 or corresponding Sections of any future Internal Revenue Code. Any such assets not so disposed of shall be disposed of by the Superior Court of the county in which the principal office of SAE is then located, for such purposes or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

Affidavit of Permission to Use Business Name

State of Florida
County of St. Lucie

Before me, the undersigned authority, personally appeared Oveda Taylor Richard, who, being duly sworn, deposes and says:

1. Affiant Information
   I, Oveda Taylor Richard, am the Founder and Chairwoman of Sunrise Academy of Excellence, Inc., located at 5200 Oleander Avenue, Fort Pierce FL 34982. My contact number is (772) 370-8938

2. Grant of Permission
   I hereby grant permission to Sunrise Academy of Excellence, a nonprofit organization, to use the business name "Sunrise Academy of Excellence Inc." and any substantially similar variation thereof, including "Sunrise Academy of Excellence, Inc.", for its nonprofit and educational operations.

3. Purpose
   This permission is granted to ensure that Sunrise Academy of Excellence Inc. may legally and publicly operate under the approved name for educational, charitable, and community programs consistent with its nonprofit mission.

4. Duration
   This permission is granted indefinitely, unless and until revoked in writing by the undersigned or a duly authorized successor of Sunrise Academy of Excellence, Inc.

5. No Conflict of Interest
   I affirm that granting this permission does not create a conflict of interest or any financial entanglement between Sunrise Academy of Excellence and Sunrise Academy of Excellence, Inc. Both entities shall remain separate legal entities with distinct governance, finances, and operational responsibilities.

6. Authority
   I have full authority to execute this affidavit on behalf of Sunrise Academy of Excellence, Inc. in my official capacity as Founder and Chairwoman.

I affirm under penalties of perjury that the foregoing statements are true and correct to the best of my knowledge and belief.

Signature of Affiant: Oveda Taylor Richard

Oveda Taylor Richard, Founder & Chairwoman
Sunrise Academy of Excellence, Inc.
5200 Oleander Avenue, Fort Pierce FL 34982
(772) 370-8938

Jurat / Notarial Certificate (Florida)

Sworn to (or affirmed) and subscribed before me by means of ☑ physical presence ☐ online notarization, this 21st day of October, 2025, by Oveda Taylor Richard, who is ☑ personally known to me or ☐ has produced _____ as identification.

Notary Public – State of Florida: _____

Printed Name of Notary: Molly Sanderson

Commission No.: HH 253031 My Commission Expires: 4-13-26

(Notary Seal)

Notary Public State of Florida
Molly Sanderson
My Commission
HH 253031
Exp. 4/13/2026