

**N9500002640**

FILED  
95 JUN -7 PM 12:21  
TALLAHASSEE, FLORIDA

BETTY J. POTTS  
(Requestor's Name)  
4215 KINGSWOOD DR  
(Address)  
TLH, FL 32303 904-562-0445  
(City, State, Zip) (Phone #)

OFFICE USE ONLY

100001507241  
-06/07/95--01062--001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

- NATIONAL ASSOCIATION FOR FINANCIAL EDUCATION, INC  
(Corporation Name) (Document #)
- \_\_\_\_\_  
(Corporation Name) (Document #)
- \_\_\_\_\_  
(Corporation Name) (Document #)
- \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in     Pick up time 12:20     Certified Copy  
 Mail out     Will wait     Photocopy     Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

D. BROWN JUN - 7 1995

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Examiner's Initials

**ARTICLES OF INCORPORATION**

**FOR**

**THE NATIONAL ASSOCIATION FOR FINANCIAL EDUCATION, INC.**

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The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

**ARTICLE I NAME**

The name of the corporation shall be:

**THE NATIONAL ASSOCIATION FOR FINANCIAL EDUCATION, INC**

**ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS**

The principal place of business and the mailing address of this corporation shall be:

**4215 KINGSWOOD DR  
TALLAHASSEE, FL 32303**

**ARTICLE III PURPOSE(S)**

The specific purpose(s) for which the corporation is organized is (are):

**TO PUBLISH FINANCIAL EDUCATIONAL LITERATURE,  
AUDIO TAPES AND VIDEOS, CONDUCT SEMINARS,  
AND ANY OTHER PURPOSES WHICH NON-PROFITS  
MAY HAVE BY LAW.**

**ARTICLE IV MANNER OF ELECTION OF DIRECTORS**

The manner in which the directors are elected or appointed is as follows:

**AS PROVIDED IN THE BY-LAWS**

**ARTICLE V LIMITATION OF CORPORATE POWERS**

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, unless limited as follows:

N/A

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and the street address of the initial registered agent is:

BETTY J. POTTS  
4215 KINGSWOOD DR  
TALLAHASSEE, FL 32303 - 7113


**ARTICLE VII INCORPORATORS**

The name(s) and street address(es) of the incorporator(s) for these Articles of Incorporation is(are):

BETTY J. POTTS  
4215 KINGSWOOD DR.  
TALLAHASSEE, FL  
32303 - 7113

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this  
7TH day of JUNE, 19 95

Signature(s) of the Incorporator(s)

  
\_\_\_\_\_

BETTY J. POTTS  
Typed name of incorporator signing

\_\_\_\_\_  
Typed name of incorporator signing

\_\_\_\_\_  
Typed name of incorporator signing

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: THE NATIONAL ASSOCIATION FOR FINANCIAL EDUCATION, INC.

2. The name and address of the registered agent and office is:

BETTY J. POTTS  
(NAME)

4215 KINGSWOOD DR.  
(P.O. BOX NOT ACCEPTABLE)

TALLAHASSEE, FL 32303 - 7113  
(CITY/STATE/ZIP)

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HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Betty J. Potts

DATE

07 JUN 95