

N96000003009

Kathy Wehrhuff - President.
9438 U.S. Hwy 19 N.
Port Richey, FL #215
34668

FILED

96 JUN -3 PM 3:01

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TALLAHASSEE, FLORIDA

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W96-10662
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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
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REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Handwritten signature and initials
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FLORIDA DEPARTMENT OF STATE
Sandra B. Morthum
Secretary of State

May 20, 1996

KATHY WOODRUFF
9438 U.S. HWY. 19 NORTH, #215
PORT RICHEY, FL 34668

SUBJECT: SUNSHINE CHILD HELP PROGRAM
Ref. Number: W96000010662

We have received your document for SUNSHINE CHILD HELP PROGRAM and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6927.

Kathy Hyman
Document Specialist

Letter Number: 696A00024938

ARTICLES OF INCORPORATION

FOR

Sunshine Child Help Program, INC.

FILED
96 JUN -3 PM 01
CLERK

The undersigned, acting as incorporator(s) of a non-profit corporation pursuant to Chapter 617, Florida Statutes, adopts the following Articles of Incorporation:

ARTICLE I: NAME

The name of the corporation shall be:

Sunshine Child Help Program, INC

ARTICLE II: PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

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

9438 U.S. Hwy 19, N. # 215
Port Richey, FL 34668

ARTICLE III: PURPOSE(S)

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

To develop and create positive programs to help benefit our children

ARTICLE IV: MANNER OF ELECTION OF DIRECTORS

As Regulated by our bylaws

ARTICLE V: LIMITATION OF CORPORATE POWERS

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

NO limitations

ARTICLE VI: INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Kathy Woodruff
9438 U.S. Hwy 19, N. #215
Port Richey, Fl 34668

ARTICLE VII: INCORPORATORS

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

Kathy Woodruff
6034 Louisiana Ave
New Port Richey, Fl 34653

Elizabeth Wells
531 Monroe Ave
New Port Richey, Fl 34653

Rocky Al-Jumaily
6034 Louisiana Ave
New Port Richey, Fl 34653

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 24 day of April 19 96.

Signature(s) of the Incorporator(s):

Kathy Woodruff

KATHY WOODRUFF
Typed name

Rocky Al-Jumaily

Rocky AL-Jumaily
Typed name

Elizabeth Wells

Elizabeth WELLS
Typed name

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 designating the registered office/registered agent, in the State of Florida:

1. The name of the corporation is: _____

Sunshine Child Help Program, INC.

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

Kathy Woodruff
9438 U.S. Hwy 19, N. #215
PORT RICHEY, FL
34668
(P.O. Box is not acceptable)

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 Kathy Woodruff

DATE April 14, 1996

96 JUN -3 PM 3:06
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TALLAHASSEE
FLORIDA