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Ivey Lane Advisory Council
Requestor's Name

P.O. Box 616495
Address

Orlando FL 32811
City/State/Zip Phone #

200001856162
06/07/96 11070-000
*****70.00 *****70.00

Office Use Only

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

1 _____ (Corporation Name) _____ (Document #)
2 _____ (Corporation Name) _____ (Document #)
3 _____ (Corporation Name) _____ (Document #)
4 _____ (Corporation Name) _____ (Document #)

☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

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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

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Examiner's Initials

**ARTICLES OF INCORPORATION
OF
IVEY LANE ADVISORY COUNCIL, INC.**

(F11 11)
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The undersigned, acting as Incorporators of a non-profit corporation under Florida Statute 617, adopt the following Articles of Incorporation for such corporation.

I. NAME

The name of the Corporation is IVEY LANE ADVISORY COUNCIL, INC.

II. PRINCIPAL OFFICE / MAILING ADDRESS

The street address of the initial principal office is 4555 Lenox Blvd., Orlando, Florida 32811. The mailing address is P. O. Box 616495.

III. PURPOSE

The purpose of this non-profit corporation is for IVEY LANE ADVISORY COUNCIL, INC., a citizen group, to provide a neighborhood-based family-centered outreach volunteer program to provide social, health and financial services including, but not limited to, mental health counseling, health care, economic development, and housing, and to engage in any lawful act or activity for which corporations may be organized under the laws of Florida.

IV. PERPETUAL EXISTENCE

This non-profit corporation is to have perpetual existence.

V. VESTED AUTHORITY

IVEY LANE ADVISORY COUNCIL, INC. retains the power, right and authority to appoint the Board of Directors, members and officers, and to

appoint the Chairman of the Board of Directors and the Chief Executive Officer by voting once a year. The members of the Board of Directors, Chairman of the Board of Directors, other officers, and Chief Executive Officer of IVEY LANE ADVISORY COUNCIL, INC. serve at the pleasure and for the term of service as designated by the Board of Directors, and may be removed as determined by the Board of Directors. The directors of IVEY LANE ADVISORY COUNCIL, INC. will be appointed according to its by-laws.

VI. OFFICE AND AGENT

The name and street address of the initial Registered Agent and office of this corporation is:

SHARON PIERRE

4555 Lenox Blvd.
Orlando, Florida 32811

VII. INCORPORATORS

The name and address of each incorporator is:

SHARON PIERRE

4555 Lenox Blvd.
Orlando, Florida 32811

BETTYE FIGGINS

4555 Lenox Blvd.
Orlando, Florida 32811

SHARON RILEY

4555 Lenox Blvd.
Orlando, Florida 32811

IN WITNESS WHEREOF, the undersigned have made and subscribed these Articles of Incorporation for uses and purposes as aforesaid.

Sharon Pierre
SHARON PIERRE

Verma Garmma
Witness

Holly P. Hilde
Witness

THE FOREGOING DOCUMENT was acknowledged before me this 13th day of May 1996 by SHARON PIERRE who provided Florida Driver's License No. 1A1 PD 527 0 as identification and who did/did not take the oath.



PATRICIA L. PATTERSON
MY COMMISSION # CC475829 EXPIRES
August 10, 1999
BONDED THRU TROY FARM INSURANCE, INC.

Patricia L. Patterson
Notary Public
My Commission expires:

Betty F. Figgins
BETTYE FIGGINS

Verna Garman
Witness

[Signature]
Witness

THE FOREGOING DOCUMENT was acknowledged before me this 13th day of May 1996 by BETTYE FIGGINS who provided Florida Driver's License No. F 252-670-46-968-0 as identification and who did/did not take the oath.



PATRICIA L. PATTERSON
MY COMMISSION # CC475829 EXPIRES
August 10, 1999
BONDED THRU TROY FARM INSURANCE, INC.

Patricia L. Patterson
Notary Public
My Commission expires:

Sharon Riley
SHARON RILEY

[Signature]
Witness

[Signature]
Witness

THE FOREGOING DOCUMENT was acknowledged before me this 13th day of May 1996 by SHARON RILEY who provided Florida Driver's License No. 1A1 PD 527 0 as identification and who did/did not take the oath.



PATRICIA L. PATTERSON
MY COMMISSION # CC475829 EXPIRES
August 10, 1999
BONDED THRU TROY FARM INSURANCE, INC.

Patricia L. Patterson
Notary Public
My Commission expires:

ACCEPTANCE OF REGISTERED AGENT

Having been named to accept service of process for IVEY LANE ADVISORY COUNCIL, INC. at the place designated in the Articles of Incorporation, SHARON PIERRE, officer in IVEY LANE ADVISORY COUNCIL, INC, a citizens group, agrees to act in this capacity, and agrees to comply with the provisions of Section 48.091 relative to keeping open such office.

DATED at Orlando, Orange County, Florida, this 3th day of May, 1996.

Sharon Pierre
SHARON PIERRE
Officer
Ivey Lane Advisory Council, Inc.

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