

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

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Enclosed is an original and one(1) copy of the articles of incorporation and a check for

\$70.00 \$\$78.75 \$\$122.50 \$\$131.25

Filing Fee Filing Fee Filing Fee, Certified Copy & Certified Copy & Certificate

FROM \$\$\frac{\text{Printed or typed}}{\text{SOO}}\$\$\frac{\text{North}}{\text{Flagler}}\$\$\text{Dr.}\$\$\$\text{Viling Fee} \text{Dr.}\$\$\text{Viling Fee} \text{Dr.}\$\$

NOTE: Please provide the original and one copy of the articles

#### · ARTICLES OF INCORPORATION

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 61%. Florida Statutes, adopt(s) the following Articles of Incorporation

> ARTICLE I Name

The name of the corporation shall be

A Work of Art program Inc.

ARTICLETI

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

800 2 North Flagher Dr WPB, Fl 33401

milling Address POBOX 1333 WPB, FL 33402

ARTICLE III

Purpose(s)

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

Educational program tree to Poor Kidfor Free asing a sailboat as a tool. We teach them work relative skill and boating safety and much more.

ARTICLE IV

Manner of election of directors

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

elected Made by founder Athur Williams only

#### ARTICLE V

## Limitation of corporate powers

The corporate powers of this corporation are as provided in section 617 0302, Florida Statutes, unless limited are as follows

### ARTICLE VI

# Initial registered agent and street address. The name and the street address of the initial registered agent is

and the sheet dedress of the milital registered agent is
Arthur Williams
800 /2 North Flagler Dr WPB FIH 33401
Mailing Address PDBOX 1333 WB, F133402  ARTICLE VII  Incorporators  The name(s) and the street address(es) of the incorporator(s) for these articles of incorporation is(are)
Arthur Williams (founder)
800/2 North Flagher Dr. WPB, FIA 33401
Mailing Address POBOX 1333 WPB, F133402
The undersigned incorporator has executed these Articles of Incorporation this 26 day of 27
Signofilms of Lands

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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:	,	v 5
	$\Lambda \wedge \wedge$		1
	H. Work of Art Program	7.	;
	(must include suffix)	1DC	

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

Arthur Williams
(NAME)
(PO Box or Mail Drop Box NOT ACCEPTABLE)
(PO Box or Mail Drop Box NOT ACCEPTABLE)
WPB FIA 33401

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) 7/26/96
(PATE)