

19800000/392

TRANSMITTAL LETTER

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

900002450799--9
-03/09/98--01086--016
\$131.25

SUBJECT: FORT MYERS RESIDENTS ASSISTANCE, CORP.
(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

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Thomas M. Dougherty
Name (Printed or typed)

2069 First Street
Address

Fort Myers FL 33901
City, State & Zip

(941) 334-9500
Daytime Telephone number

FILED
98 MAR -9 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Handwritten signature and date 3/10/98

ARTICLES OF INCORPORATION

The undersigned incorporator, for purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:
FORT MYERS RESIDENTS ASSISTANCE, CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
4224 MICHIGAN AVENUE
FORT MYERS, FLORIDA 33901

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are):
TO ASSIST LOW INCOME RESIDENTS THROUGH AVAILABLE GRANTS

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:
DIRECTORS WILL BE APPOINTED TO TWO YEAR TERMS BY THE EXECUTIVE DIRECTOR OF THE CITY OF FORT MYERS HOUSING AUTHORITY

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS


The name and Florida street address of the initial registered agent are:

FLOSSIE M. RILEY
4224 MICHIGAN AVENUE
FORT MYERS, FLORIDA 33901

ARTICLE VI INCORPORATOR


The name and address of the Incorporator to these Articles of Incorporation are:

THOMAS DOUGHERTY, ESQUIRE
2069 FIRST STREET
FORT MYERS, FLORIDA 33901


Signature/Incorporator

3/6/98
Date

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 obligation of my position as registered agent.


Signature/Registered Agent

3/6/98
Date

FILED
MAR -9 PM 10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA