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TRANSMITTAL LETTER

98 HAY IN AH II: 56
SEDRETARY OF STATE
ALLAHASSEE FLORIDA

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

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			****131.25
SUBJECT: The Chu	rg-Strauss Syndrome (Proposed corpora	Foundation, Inc. ate name - must include suffi	ix)
			and the forms of
Enclosed is an original and	one(1) copy of the article	es 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: _	Rima Robbins		
	Name (Printed or typed) 2 Saint Andrews Court		
	Address		
	St. Augustine, FL 32084		
	City, State & Zip		_

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

Daytime Telephone number

(904) 824-1083

73 5/18

RTICLES OF INCORPORATION

The undersigned incorporator, for the 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:

The Churg-Strauss Syndrome Foundation, Inc.

PRINCIPAL OFFICE

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

2 Saint Andrews Court St. Augustine, FL 32084



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

The corporation is organized to provide information, support, and fellowship to Churg-Strauss Syndrome patients, care-givers, relatives, friends, and physicians, and to educate the general public about this very rare illness.

MANNER OF ELECTION OF DIRECTORS ARTICLE IV

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

The initial Directors are to be appointed by the Founder/Registered Agent/Incorporator and will serve two years, after which the Directors will stand for election by a majority

vote of the Directors. INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Rima Robbins 2 St. Andrews Court St. Augustine, FL 32084

ARTICLE VI INCORPORATOR

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

Rima Robbins 2 St. Andrews Court St. Augustine, FL 32084

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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/Registered Agent