

N99000003882

TRANSMITTAL LETTER

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

200002910542--4

-06/21/99--01102--006

131.25 **87.50

SUBJECT: Project Mentor, Inc.
(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: Sherry Sacino
Name (Printed or typed)
235 Central Avenue
Address
St. Petersburg FL 33701
City, State & Zip

99 JUN 21 AM 10:50
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

Sherry Sacino GAVE (727) 894-7273
AUTHORIZATION BY PHONE TO
Daytime Telephone number

CORRECT add corp. suffix

DATE 6/24/99

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

99000014722
JUN 24 1999

ARTICLES 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

Project Mentor, Inc.

Article II Principal Office

**235 Central Avenue
St. Petersburg, FL 33701**

Article III Purpose(s)

To facilitate the interaction of adult and youth mentors with youngsters who seek to learn from their mentor's personal experiences.

Article IV Manner of election of directors

The Board of Directors will consist of a minimum of four (4) and a maximum of twenty-four (24) members. The Board members will be nominated based on the strategic needs of the organization by the current members of the Board. All nominees to the Board will be approved by a majority vote of a quorum of the entire current Board with a veto power given to the Executive Director. In the event of a tie, the nominee will be elected to the Board. All Board members will serve a minimum of one year and a maximum of five years. The length of service will be determined by the strategic need of the organization.

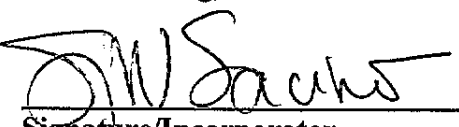
Article V Initial registered agent and street address

**Sherry Wheatley Sacino
235 Central Avenue
St. Petersburg, FL 33701**

Article VI Incorporator

**Sherry Wheatley Sacino
235 Central Avenue
St. Petersburg, FL 33701**

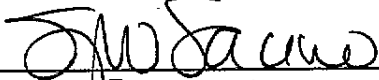
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SECRETARY OF STATE
TALLAHASSEE FLORIDA



Signature/Incorporator

6/15/99
Date

Having been named the 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 Incorporator

6/15/99
Date

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TALLAHASSEE FLORIDA