

TRANSMITTAL LETTER

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

FILED
99 AUG 16 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: ECSTASY Foundation, Inc.
(Proposed corporate name - must include suffix)

800002960978--3
-08/16/99--01108--015
*****78.75 *****78.75

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 of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Edwina Doyle Wilson
Name (Printed or typed)

754 John Anderson Dr.
Address

Ormond Beach, FL 32176
City, State & Zip

904-441-9348
Daytime Telephone number

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

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

The name of the corporation shall be:

ECSTASY Foundation, Inc.

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 1708, Ormond Beach, FL 32175-1708

ARTICLE III PURPOSE(S)

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

To publish and distribute the Kiss the Bliss Handbook to all 13 to 23-year olds. (ECSTASY - "Earth's Consciousness Shifting Through Awakened Spiritual Youth")

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

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

~~The President shall select the initial board.~~
As stated in thy bylaws.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Edwina Doyle Wilson
754 John Anderson Dr.
Ormond Beach, FL 32176

ARTICLE VI INCORPORATOR

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

Edwina Doyle Wilson
754 John Anderson Dr.
Ormond Beach, FL 32176

Edwina Doyle Wilson
Signature/Incorporator

August 10, 1999
Date

(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.

Edwina Doyle Wilson
Signature/Registered Agent

August 10, 1999
Date

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