

TRANSMITTAL LETTER

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

000004687060--6
-11/19/01--01035--010
*****78.75 *****78.75

SUBJECT: The Family Of Tampa, 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 of Status
& a Certified Copy
of the Articles
of Incorporation

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Carita M. Wells, Esquire

Name (Printed or typed)

1435 W. Busch Blvd., Suite A

Address

Tampa, Florida 33612

City, State & Zip

(813) 935-8668

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 DEC -4 AM 9:47

FILED

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

SMITH DEC 04 2001

51



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

November 20, 2001

CARITA M. WELLS, ESQ
1435 W BUSCH BLVD, STE A
TAMPA, FL 33612

SUBJECT: THE FAMILY OF TAMPA, INC.
Ref. Number: W01000026666

We have received your document for THE FAMILY OF TAMPA, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith
Document Specialist
New Filing Section

Letter Number: 701A00062304

ARTICLES OF INCORPORATION

OF

"The Family Of Tampa, Inc."

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE UNDERSIGNED subscribed to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I - Name

The name of the corporation is The Family of Tampa, Inc.

ARTICLE II - Purpose of Corporation

This corporation is organized for the purpose of transacting any or all lawful business for which corporations may be incorporated and permitted under the laws of the United States and of the State of Florida.

ARTICLE III - Capital Stock

This corporation is authorized to issue 1,000,000 shares of \$1 par value common stock.

ARTICLE IV - Term of Existence

The corporation shall exist perpetually.

ARTICLE V - Initial Registered Office and Agent

The street address of the initial registered office of this corporation is 1435 W. Busch Boulevard, Suite A Tampa, Florida 33612, the name of the initial registered agent at that address is Carita M. Wells, Esquire

ARTICLE VI - Principle Office of Corporation

The street address and mailing address of the Principal office of the corporation is 6515 N. Armenia Avenue, Tampa, Florida 33604.

ARTICLE VII - Initial Board of Directors

The corporation shall have seven (7) director(s) initially. The number of directors may be either increased or diminished from time to time by the By-laws but shall never be less than one.

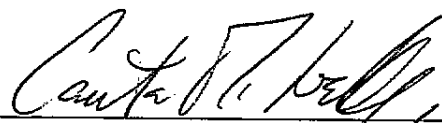
ARTICLE VIII - Incorporator

The name and address of the person signing these Articles of Incorporation is: Carita M. Wells, Esquire, Law Offices Of Carita M. Wells, P.A., 1435 W. Busch Boulevard, Suite A., Tampa, Florida 33612.

ARTICLE IX - Indemnification

The corporation shall indemnify any incorporator, officer or director or any former officer, director or incorporator, to the fullest extent permitted by law.

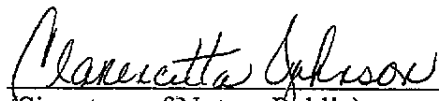
IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 14th day of November, 2001.


Carita M. Wells, Esquire

STATE OF FLORIDA)
COUNTY OF HILLSBOROUGH)

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Carita M. Wells, who is known to me or who has produced _____ as identification, who did not take an oath, and who executed the foregoing Articles of Incorporation, and (s)he acknowledged before me that (s)he executed those Articles of Incorporation.

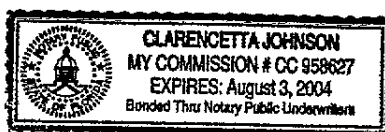
IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal, in the State and County aforesaid this 14th day of November, 2001 and who did take an oath.


(Signature of Notary Public)

CLARENCETTA JOHNSON
(Typed or printed name of Notary Public)

Notary Public, State of Florida

My commission expires:

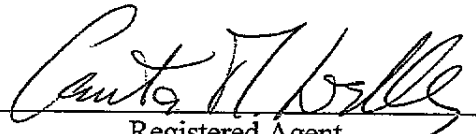


**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN THIS STATE,
NAMING AGENT UPON WHO PROCESS MAY BE SERVED.**

The following is submitted in compliance with Chapter 48.091, Florida Statutes:

That LAW OFFICES OF CARITA M. WELLS, P.A., organized under the laws of the State of Florida, with its principal office, as indicated in the Articles of Incorporation in Hillsborough County, Florida, has named CARITA M. WELLS, Esquire as Registered Agent, and 1435 West Busch Blvd., Suite A., Tampa, Florida 33612 as the place where service of process may be served within this State.

Having been named to accept service of process for the above-named corporation, at the place designated in this Certificate, I hereby accept the obligations of the position of Registered Agent under Section 607.0505 and agree to comply with the provisions of said Act.


Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA