

P03000011165

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

Shawn Adams GAVE
AUTHORIZATION BY PHONE TO
CORRECT Articles
DATE 11/30/03
DOC. EXAM S. Adams



900010189949

01/23/03--01048--003 **78.50

03 JAN 23 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

SE
1/30

TRANSMITTAL LETTER

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

SUBJECT: THE SHAWN ADAMS FOUNDATION, 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

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM:

MR. SHAWN ADAMS
Name (Printed or typed)

1416^{##A} NEW YORK AVE
Address

LYNN HAVEN, FL 32444
City, State & Zip

950-271-1212
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

03 JAN 23 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

THE SHAW ADAMS Foundation, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1416 #A NEW YORK AVE LYNN HAVEN, FL 32444

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

- ① To provide job training & job placement for the handicap
- ② To provide transportation for the elderly and handicap.
- ③ To promote technology and computer science for handicap.

ARTICLE IV SHARES

The number of shares of stock is:

4

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

CEO - SHAW ADAMS - 1416 NEW YORK AVE Apt A. LYNN HAVEN, FL 32444
DIRECTOR - ANTHONY WILLIAMS - 1709 LOUISIANA AVE, PANAMA CITY, FL 32405
SECRETARY - ANTHONY WILLIAMS - 1709 LOUISIANA AVE, PANAMA CITY, FL 32405
TREASURER - CLAY BAZZEL -
Sgt of Arms - LAVERNE BALDWIN - 1709 LOUISIANA AVE PANAMA CITY FL 32405

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ANTHONY WILLIAMS
1709 LOUISIANA AVE
PANAMA CITY, FL 32405

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SHAW ADAMS
1416 NEW YORK AVE Apt A
LYNN HAVEN, FL 32444

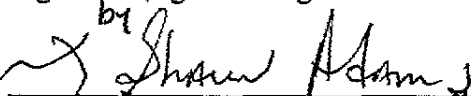
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

01-14-03

Date

by


Signature/Incorporator

01-14-03

Date