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TALLAHASSEE FLORIDA

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COVER LETTER

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

SUBJECT: Tallahassee Housing Foundation INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: EDDIE L-AKINS
Name (Printed or typed)

171 RANCH RD
Address

QUINCY, FL 32351
City, State & Zip

850 875 1797
Daytime Telephone number

edl@akins@tds-net
E-mail address: (to be used for future annual report notification)

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)

ARTICLE I NAME

The name of the corporation shall be: TALLAHASSEE Housing Foundation INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
171 RANCH RD
Quincy FL 32351

Mailing address, if different is:

171 RANCH RD
QUINCY, FL 32351

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONSTRUCTION

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Eddie L. AKINS
Address: 171 RANCH RD
Quincy FL 32351
PRESIDENT

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: EDDIE L. AKINS
Address: 171 RANCH RD
QUINCY, FL 32351

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Eddie L. AKINS
Address: 171 RANCH RD
Quincy FL 32351

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

Eddie L. Akins
Required Signature/Registered Agent

2/13/13
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Eddie L. Akins
Required Signature/Incorporator

2/13/13
Date