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COVER LETTER

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

SUBJECT. EPITOME OF CLASS SORORITY, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an o	original and o	ne (1) copy	of the Articles	of Incorporation	and a check for:
		\- <i>-</i> F-2-			

\$70.00 Filing Fee

\$78.75

Filing Fee &

Certificate of Status

□\$78.75 ∴

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy. & Certificate

ADDITIONAL COPY REQUIRED A

FROM

Kendra Richardson

Name (Printed or typed)

1153 Brookwood Bluff Rd. E.

Address

Jacksonville, FL. 32225

City, State & Zip

904-962-9824

Daytime Telephone number

kjmrsjax@gmail.com

E-mail address: (to be used for future annual report notification)

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

Diane,

Enclosed is the remaining \$35 for the non-profit Articles of Corporation. Please advise if there is anything else required in order to finalize this process.

Thank you so much for your assistance, you are greatly appreciated.

Sincerely,

Kendra Johnson

Epitome of Class Sorority Inc.

July 17, 2014

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

To Whom It May Concern,

Epitome of Class Sorority, Inc. had corporation docs filed for what was supposed to be a NON-PROFIT corporation. However, after receiving an e-mailed Notice of Dissolution, it was brought to our attention that the documents were filed as FOR-PROFIT vs. the NON-PROFIT status that we requested. The company that filed the documents reached out to the Division of Corporations and was told that they needed to do an Amendment to correct the issue. After doing so, I received a response back from your office stating that this is the incorrect process to fix the NON-PROFIT filing issue.

After speaking with a Supervisor there in your office, I was told that I needed to dissolve the FOR-PROFIT corporation for Epitome of Class Sorority, Inc. in order to have the NON-PROFIT set up correctly. I was told to write a letter explaining the situation so that I could get this rectified ASAP.

I confirmed with the Supervisor that you already have the \$35 filing fee in-hand. Please switch this to a NON-PROFIT filing so that I could move forward with the 501c3 status of the corporation with the IRS. I am totally unaware of the next step so any help would be appreciated.

Thank you so much in advance for your assistance in what has been a long and confusing process.

Sincerely,

Kendra tohnson

Epitome of Class Sorority, Inc. President

kjmrsjax@gmail.com

(904) 962-9824

DEFALINDA GE CUREN GRIDIA MAISION GE CURENGRATIONS TALL AMASSECTEL GRIDIA TALL AMASSECTEL

14 JUL 22 PM 1:09

MECEINED

ARTICLES OF INCORPORATION In compliance with Chapter 617, F.S., (Not for Profit)

ARTI	CLE I	· 1	VAL	Œ

EPITOME OF CLASS SORORITY, IN

A	R	Ħ	CLE	П	PRINCIPAL OFFICE

Principal street address:

C. A. I. Os Mailing address, if different is:

3545-1 ST JOHNS BLUFF RD S 211

IACKSONVILLE EL 32224

<u> </u>	DROONVILLE, FL. 32224			<u> </u>	
				·	
· · · · ·			Sorority, Inc. is a mo		
	The Epitome of Class Sorority en				
powerful lady i	n society, regardless of past experiences	and current situa	tions. These ladies act	nieve a sense of c	onfidence and
independer	nce that will lead them to a passion	on-filled life d	evoted to giving b	ack and payin	g it forward
Epitome of	f Clss's legacy will be apparen	t in the mar	y lives of the you	ung ladies it i	influences
1.					
ARTICLE IV	MANNER OF ELECTION The m	anner in which th	e directors are elected an	d appointed:	y + + 1, 2
Voted in by	the Board of Director's	,		· · · · · · · · · · · · · · · · · · ·	
ARTICLE V	INITIAL OFFICERS AND/OR DI	RECTORS			
Name and Title:	Kendra Richardson, Board Chair	Name and Title	Terrell Nickles,	Vice Chair	
Addr e ss _	1153 Brookwood Bluff Rd. E.	Address:	5786 Sandsto	one Way	
:	Jacksonville, FL. 32225		Jacksonville,	FL. 32258	•
Name and Title:	Ninon Rhome, Committee Chair	Name and Title	Mariel Foster, Secret	ary & Treasurer	
Address	7920 Merrill Rd. #802	Address:	6680 Bennett	Creek Dr.	
	Jacksonville, FL. 32277		Jacksonville,	FL. 32216	
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ARTICLE VI	REGISTERED AGENT			• • • • • • • • • • • • • • • • • • • •	,	
	prida street address (P.O. Box NOT acce	ptable) of the reg	istered agent is:	, 44	• • • •	5. s.
٠.	Michael Ceaser				三葉 子	· · · :
Name:					SE SE	77
Address:	1840 Southside Blvd, B	ldg.2			工门一	The second
	Jacksonville, FL. 3221	 6		•	- 30 A	· •
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ARTICLE VII	INCORPORATOR dress of the Incorporator is:				- E. S	2
					upri 🗸	
Name:	Kendra Richardson	<u>:</u>				
Address:	1153 Brookwood Bluff F	Rd. E.	:			
Addiess.	Jacksonvilla El 3222			•		
	Jacksonville, FL. 3222	. <u>5 </u>				
				, , ,		,
Having been nam	ed as registered ggopt to accept service	of process for th	ie above stated coi	poration at the	place designate	ed in this
certificated are fa	miliar with and accept the appointment a	is registered agen	nt and agree to act	in this capacity		,
: //n				$\mathcal{A}_{\mathcal{A}}$	5/14	
	Required Signature of Registered	Agent			Date	
I submit this document	ment and affirm that the facts stated here of State constitutes of third degree felony	in are true. I am as provided for i	aware that any fai n s \$17155 E &	ise information s	ubmitted in a d	locument
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	Required Signature of Incor	norstor	 . ·-		Date	