

N16000007841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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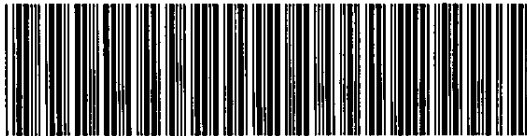
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: JAMACIA PROJECT IN ACTION, 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

ADDITIONAL COPY REQUIRED

FROM: CLAUDETTE JOHNSON
Name (Printed or typed)

6151 MIRAMAR PARKWAY , SUITE 310
Address

MIRAMAR, FL 33023
City, State & Zip

954-695-2112
Daytime Telephone number

INFO@JAMAICAPROJECTINACTION.ORG

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 27, 2016

CLAUDETTE JOHNSON
6151 MIRAMAR PKWY STE 310
MIRAMAR, FL 33023

SUBJECT: JAMAICA PROCT IN ACTION, INC
Ref. Number: W16000052139

We have received your document for JAMAICA PROCT IN ACTION, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears that the word PROCT in the name of this entity is misspelled. If this misspelling was intentional, simply resubmit the document with the word spelled PROCT. If you did not misspell this word intentionally, please correct the spelling to read PROJECT and resubmit the document for processing.

Please return 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) 245-6052.

Jessica A Fason
Regulatory Specialist II

Letter Number: 416A00015679

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(21) AUG 11 2016

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Project 03
JAMAICA ~~PROE~~T IN ACTION, INC / *Jamaica Project In Action Inc.*

ARTICLE II PRINCIPAL OFFICE

Principal street address:
6151 MIRAMAR PARKWAY
SUITE 310
MIRAMAR, FL 33023

Mailing address, if different is:
SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The general purpose of this corporation is to engage in the transaction of any or all lawful business for which corporation may be incorporated pursuant to the laws of the state of Florida.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: *Directors will be elected from initial organizational meeting as provided for in the bylaws*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CLAUDETTE JOHNSON
Address: 6151 MIRAMAR PARKWAY
SUITE 310
MIRAMAR, FL 33023

Name and Title: PRESIDENT

Name and Title: DENNIS RICHARDS
Address: 702 RIVERBEND DRIVE
AUGUSTA GEORGIA 30907

Name and Title: V. PRESIDENT

Name and Title: CLAUDETTE JOHNSON
Address: 6151 MIRAMAR PARKWAY
SUIRE 310
MIRAMAR, FL 33023

Name and Title: TREASURER

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Name and Title: SIMONE SCOTT Name and Title: SECRETARY

Address: 6151 MIRAMAR PARLWAY
SUITE 310
MIRAMAR, FL 33023

Name and Title: _____ Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: CLAUDETTE JOHNSON
Address: 6151 MIRAMAR PARKWAY# 310
MIRAMAR, FL 33023

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CLAUDETTE JOHNSON
Address: 6151 MIRAMAR PARKWAY # 310
MIRAMAR, FL 33023

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Claudette Johnson
Required Signature of Registered Agent

7/10/16
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

Claudette Johnson
Required Signature of Incorporator

7/10/16
Date