

N23000004566

(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:

w20-12452

Office Use Only



300339616213

02/07/20--01002--010 **70.00

FILED
2020 FEB 12 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FL 32309

2020 FEB 12 PM 12:02

FEB 12 2020
K Brumley

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

GOOD DEEDS INITIATIVE INC

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

Signature _____

Requested by: SETH

02/12/20

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

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

ARTICLE I NAME

The name of the corporation shall be: Good Deeds Initiative Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2283 SW 58 Way

West Park, FL 33023

Mailing address, if different is:

2283 SW 58 Way

West Park, FL 33023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all purposes permitted pursuant to IRS Code 501(c)(3)

including but not limited to charitable, educational, scientific, literary, testing for public, safety,

fostering national or international amateur sports competition, and preventing cruelty to children or animals.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: appointment
originally by President, then replacement directors elected by remaining board members.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nusrat Khan, President

Address: 2283 SW 58 Way

West Park, FL 33023

Name and Title: Mohamed Y. Khan, Secretary

Address: 2283 SW 58 Way

West Park, FL 33023

Name and Title: Yasir Khan, Treasurer

Address: 2283 SW 58 Way

West Park, FL 33023

Name and Title: Zahra Khan, Director

Address: 2283 SW 58 Way

West Park, FL 33023

Name and Title: Yasmine Shipman, Director

Address: 2283 SW 58 Way

West Park, FL 33023

Name and Title: _____

Address: _____

2020 FEB 12 PM 12:02
SECRET
TALLAHASSEE COUNTY FLORIDA

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: Yusir Billoo, Esq.

Address: 2122 Hollywood Blvd.
Hollywood, FL 33020

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Zahra Khan

Address: 2283 SW 58 Way
West Park, 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 days prior or 90 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


 Required Signature of Registered Agent

2/5/20
 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.


 Required Signature of Incorporator

2/5/20
 Date