## N25000002580

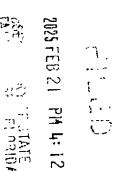
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 14, 2025

ANTWAUNE HARRIS 231 SW 64TH WAY PEMBROKE PINES, FL 33023 US

SUBJECT: SHAWANWA TRIBAL NATION INC.

Ref. Number: W25000006147

2025 FEB 21 PM 4: 12

Ί.

We have received your document for SHAWANWA TRIBAL NATION INC. and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

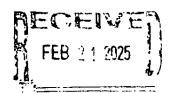
The document is unacceptable for imaging in the format that it was received. Please complete the attached form.

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.

Monique K Anderson Regulatory Specialist II

Letter Number: 525A00000962



1000

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

ARTICLE I NAME The name of the corporation shall be: SHAWANWA	I TRIBAL NATION INC.
ARTICLE II PRINCIPAL OFFICE	
Principal <u>street</u> address:	Mailing address, if different is:
231 SW 64" WAY	
rembroke Pines +1 3302/3	
ARTICLE III PURPOSE	and a large
The purpose for which the corporation is organized is:	<u> </u>
-taith-based tax-exempt non-profit u	· · · · · · · · · · · · · · · · · · ·
Charitable Religious and educational ac	· · · · · · · · · · · · · · · · · · ·
Providing cleanwrite sustainable ene	Rey humanitarian aid spiritual
enrichment, financial literary, and	community support while woho king
Religious fraedoms and public s	service intratives
ARTICLE IV MANNER OF ELECTION The manner in which	h the directors are elected and appointed:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title Anthrop HARRIS - Pesident Name	and Title: Kevin Maeshall - Vice President
Address 231 Siw 64 WAY Addres	55: 031 SIW 644 WAY
pembole pines II 35023	Lembralde Pines F1 33003
Jan Hand Rad	
Name and Title: Han's Secretary Name:	
Address 231 S.W W Way Address	58:
Pembrole Vinas II 33223	
1) \ M. \ 11	<del></del>
Name and Title: Kevin Mashall - Treasurer Name:	
Address 23 SW 64th WAY Address	ss:
tembroke Yires TI 53303	

Name and Titl	a·	NI A Trial			
		Name and Title:			
Address	<del></del>	Address:			
		_ <del></del> _			
Name and Title	e:	Name and Title:			
Address					
ADTICLE 1/1	REGISTERED AGENT				
The name and	Florida street address (P.O. Box N	OT acceptable) of the registered agent is:			
Name:	Antware H	ARRIS			
Address:	231 S.W. 64+	VAUL			
	Pembrola Pinos &	-1 33223	₹ Par	2025	
	<del>17013104   1. F.J. 1</del>	<u> </u>	, -	934	
	INCORPORATOR address of the Incorporator is:		ئارى ئادىن	6 2 I	1
		2016		<u>-</u> 2	5
Name:	MATURALINE + IAC	<u> </u>	. Pars.	:h Wd	į
Address:	231 S.W 64	YAU		12	
	Hembroke Wines	F ( 53093			
ARTICLE VII	I EFFECTIVE DATE: if other than the date of filing:	12/23/2024 WITTON	415		
(If an effective	e date is listed, the date must be s	pecific and cannot be more than five day	AL) (s prior or 90 days after	the filing	<u>(.)</u>
Note: If the da	ite inserted in this block does not m	eet the applicable statutory filing requirem	ients, this date will not be	listed as	th
document's eff	ective date on the Department of St	tate's records.			
Having been n	named as registered agent to accen	t service of process for the above stated c	cornoration at the place i	locionatod	, ,
certificate, I an	n familiar with and acce <u>p</u> t the appoi	ntment as registered agent and agree to act	t in this capacity	/	
-Au	Equired Signature of R	L	12/23	/2002	ے
	Required Signature of R	egistered Agent	Date		_
I submit this do	cument and affirm that the facts sta	ited herein are true. I am aware that any fa felony as provided for in s.817.155, F.S.	lse information submitted	in a docu	m
//	$\sim$ /	·	/ /	/	
- 1 M 111	aux Harri	e of Incorporator	12/23/5	Dr. 26/	1