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(Requestor's Name)		
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL MAIL
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(Document Number)		
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SECRETARY OF STATE

14 JUN 23 PH 3:

COVER LETTER

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

SUBJECT: USA JIVE afe NC (PROPOSEB 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: Phil Juni

8460 NAPLES HERITAGE Drive #1226

Naples FL 34112 City, State & Zip

Daytime Telephone number

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 617 F.S. (Not for profit)

Article I - Name

The name of the corporation shall be Just Drive Safe, Inc.

Article II - Principal Office

Just Drive Safe, Inc 8460 Naples Heritage Drive #1226 Naples, Florida 34112

Article III - Purpose

The purpose for which the corporation is organized is to raise public awareness and educate about the dangers of, and prevention techniques for, distracted driving.

Article IV - Election and Appointment of Officers

The manner in which the director are elected and appointed is stated in the by-laws

Article V - Initial Officers and Directors

Philip Huml 8460 Naples Heritage Drive #1226 Naples, Florida 34112

Whitney Lasky 8460 Naples Heritage Drive #1226 Naples, Florida 34112 David Pisarra, Esgirii 1305 Pico Blvd Santa Monica, Ca 90405 **T7**

Lowell Caufiel 111 Marquez Place #207 Pacific Palisades, CA 90272

Article VI - Registered Agent

Philip Huml 8460 Naples Heritage Drive #1226 Naples, Florida 34112

Article VII - Incorporator

Philip Huml 8460 Naples Heritage Drive #1226 Naples, Florida 34112

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

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 \$.817.155, F.S.

Required Signature of Incorporator

Date

SECRETARIO DE STATE