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SECRETARY OF STATE
TALLAHASSEE FLORIDA

APR 12 2016

COVER LETTER

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

SUBJECT: THINK BIG CORPORATION , serving families

(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: Arlene Reece-Solomon

Name (Printed or typed)

30 Acacia Avenue

Address

Hempstead NY 11550

City, State & Zip

516-444-6945

Daytime Telephone number

arlenesolomon32@yahoo.com

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

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

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 21, 2016

ARLENE REECE-SOLOMON
30 ACACIA AVENUE
HEMSTEAD, NY 11550

SUBJECT: THINK BIG CORPORATION, SERVING FAMILIES
Ref. Number: W16000020970

RECEIVED
16 APR 11 PM 12:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for THINK BIG CORPORATION, SERVING FAMILIES and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Is "serving families" part of the name? Also you have to COMPLETE ARTICLE VI and the Registered Agent has to sign.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 816A00005739

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

ARTICLE I NAME

The name of the corporation shall be: Think Big ~~Corporation~~ serving families Think Big Services for families
corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address:

2715 sw 34th Ave

Fort Lauderdale, FL

33312

Mailing address, if different is:

30 Acacia Avenue

Hempstead NY

11550

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The intent of TBC, is to care for the abused, the destitute, the abandoned, and

persons in need of supervision, as well as the delinquent, the neglected or dependent and/or runaway children. Residential and or/non

residential services will be offered. We intend to assist those recently released from the prison system with community reentry.

Through our job training and placement services. Our program will incorporate several workshops, to include but not limited to drug

prevention, the fostering of healthy relationships and the use of mental health resources. Think Big Corporations goal is to provide

the individual with the essential tools to thriving and achieving productive citizenship within the community.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: These individuals have

shown a vested interest, in the Mission TBC. They have agreed to assist with policy making and
implementing

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jacqueline Buchanan

Address 1701 SW Apache Ave ,

Port St Lucie

FL 34953

Name and Title: _____

Address: _____

Name and Title: Raymond Ballinger

Address 1773 Four Mile Cove Parkway

#1120, Cape Coral

FL 33990

Name and Title: _____

Address: _____

Name and Title: Kathy Baptiste

Address 671 Washington Ave

Brooklyn

NY 11238

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE FLORIDA

16 APR 11 PM 4:55

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: Julien Leplatte

Address: 2715 SW 34th Avenue
Fort Lauderdale FL.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Arlene Reece-Solomon

Address: 30 Acacia Avenue
Hempstead NY 11550

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

Julien Leplatte
Required Signature of Registered Agent

4-1-99
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.

Arlene Reece-Solomon
Required Signature of Incorporator

3/7/2016
Date

16 APR 11 PM 4:56
TALLAHASSEE FLORIDA
DEPARTMENT OF STATE