

TRANSMITTAL LETTER

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

SUBJECT: EMPOWERING ENTERPRISES, 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: JOHN GUNS  
Name (Printed or typed)

3738 WINTON DRIVE  
Address

JACKSONVILLE, FL 32208  
City, State & Zip

904-768-7112  
Daytime Telephone number

800003485428--3

-12/04/00--01139--006  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

00 DEC -4 PM 2:52  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

KB  
12/8

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

FILED  
00 DEC -4 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I      NAME**

*The name of the corporation shall be:*  
EMPOWERING ENTERPRISES, INC.

**ARTICLE II      PRINCIPAL OFFICE**

*The principal place of business and mailing address of this corporation shall be:*  
3738 WINTON DRIVE, JACKSONVILLE, FLORIDA 32208

**ARTICLE III      PURPOSE**

*The purpose for which the corporation is organized is:*  
TO PROVIDE MARKETING STRATEGIES, VIDEO PRODUCTION, CREATIVE SYNERGY  
AND PUBLIC RELATION STRATEGIES FOR GOVERNMENT AGENCIES, NON-PROFIT  
ORGANIZATIONS, AS WELL AS BUSINESS, INDIVIDUALS AND COMPANIES.

**ARTICLE IV      MANNER OF ELECTION**

*The manner in which the directors are elected or appointed:*  
THE MANNER IN WHICH THE DIRECTORS ARE APPOINTED WILL PARALLEL THAT  
WHICH IS STATED IN THE BY-LAWS.

**ARTICLE V      INITIAL DIRECTORS / OFFICERS**

*The name and address:*  
JOHN GUNS            1733 GALLAHADION COURT, JACKSONVILLE, FL 32218  
DEBORAH HARRIS    10321 PIEDMONT ROAD, JACKSONVILLE, FL 32218  
MELISSA GUNS        1733 GALLAHADION COURT, JACKSONVILLE, FL 32218

**ARTICLE VI      INITIAL REGISTERED AGENT AND STREET ADDRESS**

*The name and Florida street address of the registered agent is:*  
JOHN GUNS            3738 WINTON DRIVE, JACKSONVILLE, FL 32208

**ARTICLE VII      INCORPORATOR**

*The name and address of the Incorporator is:*  
JOHN GUNS            3738 WINTON DRIVE, JACKSONVILLE, FL 32208

\*\*\*\*\*  
*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.*

\_\_\_\_\_  
Signature/Registered Agent/ INCORPORATOR

\_\_\_\_\_  
Date