## TRANSMITTAL LETTER

## N02000005410

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

| SUBJECT: The  | Watoto<br>PROPOSED CORPORATI                 | Drama Ens<br>ENAME-MUST INCLUD                    | emble, Incorpor  |  |
|---|--|---|--|--|
| Enclosed is an original and   |  |   |  |  |
| ☐ \$70.00<br>Filing Fee   | □ \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy  ADDITIONAL CO | Filing Fee, Certified Copy & Certificate  PY REQUIRED  |  |
| FROM: Rasheedah Sharif Name (Printed or typed)  |  |   |  |  |
| FROM: Transpectary Start 19  524 W. Tharpe St. #19  Address  Tallahassee, Fl 32303  City, State & Zip |  |   |  |  |
| 8   | 350-383-                                     | 1990  | on and the state of the state o |  |

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

Daytime Telephone number

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| ARTICLES OF INCORPORATION In Compliance with Chapter 617, F.S., (Not for Profit)   |   |
|--|---|
| The name of the corporation shall be: The Watoto Drama Ensemble, Incorporated  |   |
| ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:  524 W. Tharpe St. #19 Tallahassee, Fl 32303                                |   |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: to help provide an increase awareness of Self, and to develop the faculties and powers in Children by teaching. | C |
| The manner in which the directors are elected or appointed: The manner in which the directors are elected or appointed is stated in the by laws.   |   |
| ARTICLE V INITIAL DIRECTORS/OFFICERS  The name(s), address(es) and title(s):  Optional   |   |
| AMII: 42   |   |
| ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address of the registered agent is:  Rasheedah Sharif  524 W. Tharpe St. #19 Tallahassee, Fl 32303     | • |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  Rasheedah Sharif 524 W. Tharpe St # 19 Tallahassee, Fl 32303  |   |
| **************************************   |   |

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

Rasheedah Sharif

Date

Date

Date