## NU 30000000582

(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone#	<del>f</del> )
PICK-UP	☐ WAIT	MAIL
	siness Entity Name	
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(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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PINISION OF CHARGINATION

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## TRANSMITTAL LETTER

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

SUBJECT:TH	E DOUBLE ACTI	ON FOUNDATION TENAME-MUST INCLU	INC.
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLU</u>	DE SUFFIX)
Enclosed is an origina	al and one(1) copy of the arti	cles of incorporation and a	a check for :
☐ \$70.00 Filing Fee	78.75 Filing Fee &	\$78.75 Filing Fee	\$87.50 Filing Fee,
	Certificate of Status	& Certified Copy	Certified Copy & Certificate
		ADDITIONAL COPY REQUIRED	

FROM: _	AHMAD FLEMING Name (Printed or typed)	-
-	PO BOX 170143 Address	_
-	Miami FC 33 City, State & Zip	_
	(305) S19-6979 Daytime Telephone number	-

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 FILED The name of the corporation shall be: THE DOUBLE ACTION Foundation TIC 03 JAN 23 PM 4:50 ARTICLE II PRINCIPAL OFFICE SECRETARY OF STATE The principal place of business and mailing address of this corporation shall be: TALLAHASSEE, FLORIDA Miami FL 33017 10 Box 170 143 ARTICLE III PURPOSE The purpose for which the corporation is organized is: A NON- Profit Organization to Help Benefit INNET City COMMUNITIES ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected or appointed: THE METHOD OF Elections are "saccording to the Bylaws ARTICLE V INITIAL DIRECTORS OFFICERS The name(s), address(es) and title(s): .. 7 ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the registered agent is: AHMAD Fleming Tallahassee FL 32311 2553 Chateau Lv. unit B ARTICLE VII INCORPORATOR The name and address of the Incorporator is: P.O. BOX 170143 MIAMI FL 33017 Ahmad Flemina

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

Date

| 1/3/03|
| Signature/Incorporatof

| Date | Date