

N03000006954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

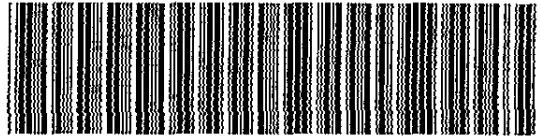
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2003 AUG 11 PM 3:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08-13-03

TRANSMITTAL LETTER

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

SUBJECT: New Beginnings Mentorship & Aftercare Program 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: Phillip C. Lee
Name (Printed or typed)

9211, 103rd St, #62
Address

Jacksonville, FL, 32210
City, State & Zip

(904)908-4987
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 4, 2003

PHILLIP C. LEE
9211 103RD ST #62
JACKSONVILLE, FL 32210

SUBJECT: NEW BEGINNINGS MENTORSHIP & AFTERCARE PROGRAM INC.
Ref. Number: W03000021923

We have received your document for NEW BEGINNINGS MENTORSHIP & AFTERCARE PROGRAM INC. and your check(s) totaling \$148.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 the original and one copy of 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) 245-6928.

Tim Burch
Document Specialist
New Filings Section

Letter Number: 203A00044658

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

New Beginnings Mentorship & Aftercare Program Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3838, Firestone Rd, 32210, Mailing Address P.O. Box 14270, Jacksonville, FL, 32238

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To help Ex-offenders transition back into the community

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

My their number of years being a part of the Prison Ministry

They are Chaoosen And Elected by President
Phillip Lee

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Phillip Lee 9211, 103rd st, #62, Jacksonville FL, 32210, President

Ananias Watts 3838 firestone Rd, Jacksonville FL, 32210, Vice President

Karen Baker 3838, Fire Stone Rd, Jacksonville FL, 32210 Coordinator

Jarvis Allen 3838, Fire Stone Rd, Jacksonville FL, 32210 Treasury

Shawn Murphy 888 Briclier St, Apt A215, Jacksonville FL, 32260 Secretary

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Phillip Lee 9211, 103rd St, jacksonville FL, 32210

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Phillip Lee 9211, 103rd St, jacksonville FL, 32210

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

7/29/03
Date


Signature/Incorporator

7/29/03
Date