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B. 12/1

TRANSMITTAL LETTER

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

SUBJECT: RAYMON'S EMPOWERMENT CENTER 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: VERONICA MILLER
Name (Printed or typed)

1035 TOLKIEN LN.
Address

JACKSONVILLE, FL. 32225
City, State & Zip

(904) 220-0035
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

The name of the corporation shall be:

RAYMON'S EMPOWERMENT CENTER INC.

ARTICLE II PRINCIPAL OFFICE

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

1035 TOLKIEN LANE
JACKSONVILLE, FL 32225

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROVIDE A PLACE FOR YOUTHS AND TEENS TO GO AFTER SCHOOL AND
SUMMER TO MAKE A VALIANT EFFORT TO REDUCE JUVENILE CRIMES.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

APPOINTED BY DIRECTOR

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name(s), address(es) and title(s):

VERONICA MILLER - D	KEVIN MILLER - T	GENEVA FREEMAN - D
1035 TOLKIEN LANE	1035 TOLKIEN LANE	2005 LUGINE AVE.
JACKSONVILLE, FL 32225	JACKSONVILLE, FL. 32225	BALTIMORE, MD. 21207
ANTHONY WATKINS - SD - 1044 LAWFIN JACKSONVILLE, FL 32211		

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

VERONICA P. MILLER
1035 TOLKIEN LANE
JACKSONVILLE, FL 32225

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VERONICA MILLER
1035 TOLKIEN LANE
JACKSONVILLE, FL. 32225

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.

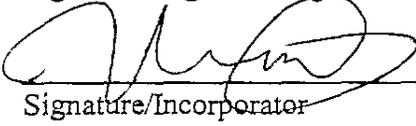
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Signature/Registered Agent

12/01/2003
Date



Signature/Incorporator

12/01/2003
Date