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## **COVER LETTER**

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

SUBJECT: The Offenders Advocate 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 CO	PY REQUIRED	
FROM: Tonya M. Brooks Name (Printed or typed)				
4140 Castleton De				
Jacksonn Je Fl 32208 City, State & Zip				

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: olers Advocate Inc ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: tm De Jax F1 32208 ARTICLE III PURPOSE The purpose for which the corporation is organized is: FI GEPT OF COrrections with To assist inmates inside FI GEPT OF Corrections with making the public aware of the corruption and abuse expenenced by them on adaly basis. ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected or appointed: ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS List name(s), address(es) and specific title(s):
Torya M. Brooks (Director) 4640 Castleton De
Marcus Brooks (Assist Director) 4640 Castleton De hx. F1 32208 INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: 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