

No 09000005712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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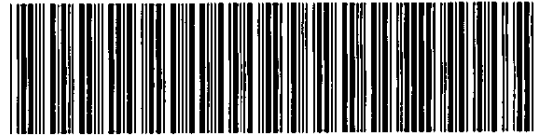
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09 JUN 10 PM 4:10

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

09 JUN 10 PM 4:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

6/10/09

## COVER LETTER

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

SUBJECT: Yo-Talent Foundation, 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: Antina D. Stafford  
Name (Printed or typed)

10275 Old St. Augustine Rd. Apt 809  
Address

Jacksonville, FL 32257  
City, State & Zip

904-697-0749  
Daytime Telephone number

Agibson@yo-talent.com  
E-mail address: (to be used for future annual report notification)

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:  
Yo-Talent Foundation, Inc.

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**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

(Same) 10275 Old St. Augustine Rd #809  
Jacksonville, FL 32257

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The corporation has been organized to promote the involvement in the arts.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

The initial directors will meet and vote for additional directors based on their qualifications and availability.

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

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

Antina D. Stafford (President), 10275 Old St. Augustine Rd. Apt 809, Jacksonville, FL 32257  
Roland M. Gibson III (Vice-President), 10275 Old St. Augustine Rd. Apt 809, Jacksonville, FL 32257  
Ebony Payne (Marketing Director), 8787 Southside Blvd. Apt 5120, Jacksonville, FL 32256

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Catherine D. Stafford  
3203 Loretto Rd.  
Jacksonville, FL 32223

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Antina D. Stafford  
10275 Old St. Augustine Rd. Apt 809  
Jacksonville, FL 32257

\*\*\*\*\*

*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.*

Catherine D. Stafford  
Signature/Registered Agent

6-10-09  
Date

[Signature]  
Signature/Incorporator

6/10/09  
Date