

N100000002603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

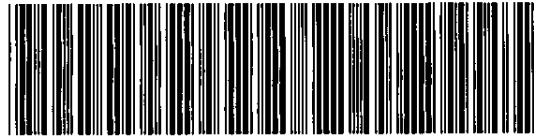
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900171713739

03/15/10--01020--009 \*\*70.00

RECEIVED

10 MAR 15 AM 11:57

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

10 MAR 15 PM 12:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B McKnight MAR 15 2010

## COVER LETTER

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

SUBJECT: \_\_\_\_\_

WISE UP

(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: \_\_\_\_\_

MARTIN JARON

Name (Printed or typed)

8051 TENNISON DRIVE

Address

TALLAHASSEE, FL 32309

City, State & Zip

850 294-0384

Daytime Telephone number

JARONX2@COMCAST.NET

E-mail address: (to be used for future annual report notification)

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

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S., (Not for Profit)

**FILED**  
10 MAR 15 PM 2:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

WISE UP ORG. CORP

**ARTICLE II PRINCIPAL OFFICE**

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

8051 Tennyson Drive  
Tallahassee, FL 32309

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO DISSEMINATE INFORMATION ABOUT ISRAEL

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

AS STATED IN THE BYLAWS

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

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

MARTIN JARON - PRESIDENT  
MELANIE ANNS - VICE PRESIDENT  
JAMES JARON - SECRETARY/TREASURER

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

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

MARTIN JARON  
8051 Tennyson Drive  
Tallahassee, FL 32308

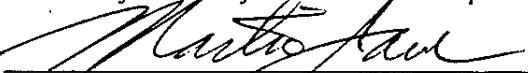
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

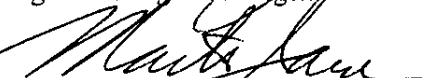
MARTIN JARON  
8051 Tennyson Drive  
Tallahassee, FL 32309

\*\*\*\*\*

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

3/15/10  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

3/15/10  
\_\_\_\_\_  
Date