8APPCCCON1

(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:					
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COVER LETTER

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

SUBJECT: Tell The Truth, Inc.

	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
inclosed is an original	l and one (1) copy of the Ar	ticles of Incorporation an	d 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 C	OPY REQUIRED		
FROM	Michele Garde	n			
	1801 32nd St			2010 OCT 13	DI NOISIVIU
	Bradenton, FI	34205 State & Zip			F CORPCR
	941-812-7311 1801 32PayStree	ewelgne number		PM 3: 44	

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

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

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

ARTICLE I The name of the cor	NAME Tell The Truth, Inc.	.,, (FILLED SECRETARY OF STALL DIVISION OF CORPORATION
	PRINCIPAL OFFICE		\$
ARTICLE II	Principal street address		Mailing address, if different is:
	1801 32nd Street West		
	Bradenton, Fl. 34205	<u> </u>	
4 DAIGI D 111	numbers.		
ARTICLE III	PURPOSE		
	nich the corporation is organized is: ion is organized as a not-for-profit o	corneration and the n	ournana of the Organization is to
	empt political activity as describe in		
ARTICLE IV	MANNER OF ELECTION The manner	in which the directors are ele	ected and appointed:
	or in the bylaws		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	ORS	
Name and Tit	le: Michele Garden, President & Treasu	rer Name and Title:	
Address:	1801 32nd Street West Bradenton, FI 34205	Address:	
	Bladelitoli, 11 34203		
Name and Tit	1	Nome and Title:	
Address:	le:		
			-
	le:		
Address:	•		
			-
DTICLE DE	REGISTERED AGENT		
	ida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Michele Garden	_	
Address:	1801 32nd Street West Bradenton, FL 34205		
	Brauenion, FL 34205	<u></u>	
DTICLE III	INCORPORATOR		
	INCORPORATOR ress of the Incorporator is:		
Name:	Michele Garden		
Address:	1801 32nd Street West	,	
	Bradenton, Fl 34205		•
	d as registered agent to accept service of pro iliar with and accept the appointment as regist		
7			• •
<u> </u>	while Deneles		10 · U. 10
_	Required Signature of Registered Agent		Date
submit this docum	ent and affirm that the facts stated herein are	true. I am aware that any	false information submitted in a documen:
	f State constitutes a third degree felony as prov		
\/\	Nichola March		10.4.0
	Required Signature of Incorporato	<u> </u>	Date
	vadanaa aikimma oi moothoism	•	17810