

0110000000127

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

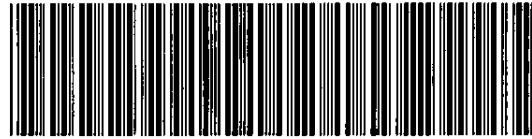
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400189062364

01/03/11--01033--016 **78.75

RECEIVED
FEB 11 2011
FEB 11 2011

11 JAN -3 PM 2:26

11/9/11

COVER LETTER

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

SUBJECT: Teach Me 2 Save, 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: Leanette Fernandez
Name (Printed or typed)

13730 Newport Manor
Address

Davie, Florida 33325
City, State & Zip

305-972-8075
Daytime Telephone number

Leanette@TeachMe2Save.com
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)

ARTICLE I NAME

The name of the corporation shall be: Teach Me 2 Save, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

13730 Newport Manor
Davie, Florida 33325

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Giving help to those in need by providing Care Packages and Education on the use of coupons, via the internet and training courses, to share the Love and Hope found in Jesus Christ.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

As provided for in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Leanette Fernandez, President
Address: 13730 Newport Manor
Davie, Florida 33325

Name and Title: Arturo Fernandez, Vice President
Address: 13730 Newport Manor
Davie, Florida 33325

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Leanette Fernandez
Address: 13730 Newport Manor
Davie, Florida 33325

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Leanette Fernandez
Address: 13730 Newport Manor
Davie, Florida 33325

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

Leanette Fernandez
Required Signature of Registered Agent

12/30/10
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Leanette Fernandez
Required Signature of Incorporator

12/30/10
Date

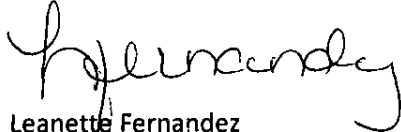
11 JAN -3 PM 2:26
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dec 30, 2010

I, Leanette Fernandez, am the owner of the dissolved corporation and hereby declare that it will not be reinstated. I request that the Corporation Name, Teach Me 2 Save, Inc., be released so that I can use it for the non-profit corporation I am establishing.

Thank you for your assistance in this matter.

Warm Regards,



Leanette Fernandez