

N 1100 0000 459

(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



600190714756

01/18/11--01065--024 \*\*88.00

FILED

2011 JAN 19 PM 12:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers JAN 20 2011

COVER LETTER

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

SUBJECT: The Essence of Change, Corp.  
(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: Jamie L. Johnson  
Name (Printed or typed)

8433 Southside Blvd # 1905  
Address

Jacksonville, FL 32256  
City, State & Zip

815-214-1345  
Daytime Telephone number

essenceofchange10@gmail.com  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 JAN 19 PM 12:58

FILED

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: The Essence of Change Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
8433 Southside Blvd #1905  
Jacksonville, FL 32256

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The purpose of this corporation is to provide food, counseling, shelter and monetary means for single parent households.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: This manner will be provided in the bylaws.

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

Name and Title: Jamie Johnson  
Address: 8433 Southside Blvd #1905  
Jacksonville, FL 32256  
(President)

Name and Title: Makita Tunsill  
Address: 8433 Southside Blvd #1905  
Jacksonville, FL 32256  
(Vice President)

Name and Title: Melanie Hall  
Address: 8433 Southside Blvd #1905  
Jacksonville, FL 32256  
(Secretary)

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: Jamie L. Johnson  
Address: 8433 Southside Blvd #1905  
Jacksonville, FL 32256

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jamie Johnson  
Address: 8433 Southside Blvd #1905  
Jacksonville, FL 32256

**FILED**  
2011 JAN 19 PM 12:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Jamie L Johnson

Required Signature of Registered Agent

01/14/11

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.

Jamie L Johnson

Required Signature of Incorporator

01/14/11

Date