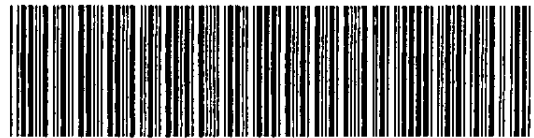


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(Requestor's Name)

(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: On My Grind Kids, 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: Kesha L. Porter

Name (Printed or typed)

3901 Sleepy Orange Lane

Address

Coconut Creek, Florida 33073

City, State & Zip

(954)856-6953

3901 Sleepy Orange Lane
Daytona Beach, FL 32117
Telephone number

kesha0474@gmail.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: On My Grind Kids, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
3901 Sleepy Orange Lane
Coconut Creek, Florida 33073

Mailing address, if different is:

P.O. BOX 93-8843
Margate, Florida 33093

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation is a nonprofit public benefit corporation and is not organized for the private gain of any person. The corporation is organized under the Nonprofit Public Benefit Corporation Law for charitable and educational purposes to aid the poor and disadvantage individuals and families toward a life of self-sufficiency. The programs will consist of but shall not be limited to: Affordable Communities, Job Training, Job Placement, Land Acquisition, m Housing, Employment, Literacy, Counseling, Temporary Shelter, Teenage Pregnancy, AIDS, Tutoring, Substance Abuse Awareness and Prevention, Elderly Care and other programs to aid those in need.

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: Kesha L. Porter P/D
Address: 3901 Sleepy Orange Lane
Coconut Creek, Florida 33073

Name and Title: Lonnie B. Johnson T/D
Address: 5045 Wiles Road Building 10 Unit 105
Coconut Creek, Florida 33073

Name and Title: Xavier L. Favors Sr. V/D
Address: 425 N.W. 19th Street
Pompano Beach, Florida 33060

Name and Title: _____
Address: _____

Name and Title: Susie A. Johnson S/D
Address: 5045 Wiles Road Building 10 Unit 105
Coconut Creek, Florida 33073

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

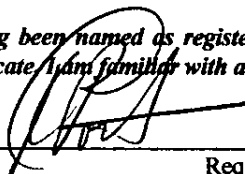
Name: Kesha L. Porter
Address: 3901 Sleepy Orange Lane
Coconut Creek, Florida 33073

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kesha L. Porter
Address: 3901 Sleepy Orange Lane
Coconut Creek, Florida 33073

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

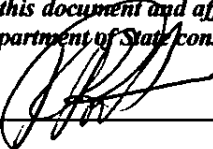


Required Signature of Registered Agent

4/22/2011

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.



Required Signature of Incorporator

4/22/2011

Date

FILED
APR 29 PM 3:09
TALLAHASSEE, FLORIDA
SECRETARY OF STATE