

N11000004365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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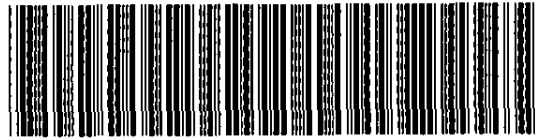
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11 MAY -4 PM 1:34

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

11 MAY -4 PM 3:50

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

11 MAY 2011

COVER LETTER

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

SUBJECT: J.A.R.R.I.L., 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: Twanetta R. Rollins
Name (Printed or typed)

386 Mandee Cove Dr
Address

Tallahassee, FL 32304
City/State & Zip

850-574-6028
Daytime Telephone number

onetwond@aol.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: J.A.R.R.I.L., Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

386 Manatee Cove Drive
Tallahassee, Florida
32304

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Juvenile prevention and intervention. To assist troubled teens in getting their education and staying out the legal system.

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

As Stated in the By Laws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Twanetta R. Rollins / Owner / CEO
Address: 386 Manatee Cove Drive
Tallahassee, Florida
32304

Name and Title: Linda J.W. Rollins / Treasurer
Address: 386 Manatee Cove Drive
Tallahassee, Florida
32304

Name and Title: Lamonte Moya / Director
Address: 386 Manatee Cove Drive
Tallahassee, Florida
32304

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: Twanetta Rollins
Address: 386 Manatee Cove Drive
Tallahassee Florida
32304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Twanetta R. Rollins
Address: 386 Manatee Cove Drive
Tallahassee, Florida
32304

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]
Required Signature of Registered Agent

May 4, 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.

[Signature]
Required Signature of Incorporator

May 4, 2011
Date