

N 11000006773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

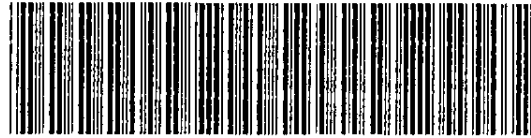
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11 JUL 15 PM 12:51



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COVER LETTER

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

SUBJECT: Olivia's Child, 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: Jennifer Bowers
Name (Printed or typed)

3761 NW171st
Address

Miami, FL 33055
City, State & Zip

786 402 3461
Daytime Telephone number

england96@aol.com
E-mail address: (to be used for future annual report notification)

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

7/13/11

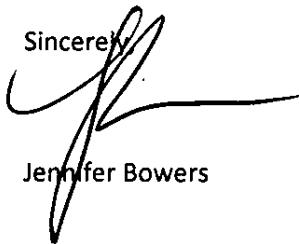
Jennifer Bowers
3761 NW 171st ST
Miami, FL 33055

RE: Olivia's Child, Inc.

Ms. Faison,

This is a resubmission of the Articles of Incorporation due to a Rejection Status.

Sincerely,

A handwritten signature in black ink, appearing to be 'JB' with a long horizontal stroke extending to the right.

Jennifer Bowers

RECEIVED
11 JUL 15 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be: Olivia's Child, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3741 NW 171st St
Miami, FL 33055

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Olivia's Child, Inc. will focus on supporting the issues that involve children and adolescents while building and improving lives through the balance of art and education.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Nominees will be

elected or appointed by the voting Members of the Board. The Board may approve classes of non voting Affiliates with rights, privileges + obligations established by the Board

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jennifer Bowers, Founder + CEO

Address: 3741 NW 171st St
Miami, FL 33055

Name and Title: _____

Address: _____

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: Jennifer Bowers

Address: 3741 NW 171st St
Miami, FL 33055

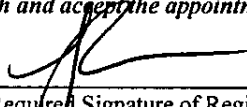
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jennifer Bowers

Address: 3741 NW 171st St
Miami, FL 33055

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

7/13/11
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.


Required Signature of Incorporator

7/13/11
Date