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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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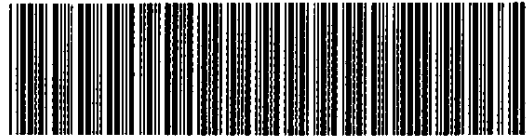
(Business Entity Name)

(Document Number)

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## COVER LETTER

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

SUBJECT: Daughters of Eden 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: Kamilah Harris

Name (Printed or typed)

3266 NW 84th Ave Apt.635

Address

Sunrise, Fl 33351

City, State & Zip

954-479-7871

3266 NW 84th Ave Apt.635  
Telephone number

Kamilah1006@yahoo.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**

Daughters of Eden Inc.

The name of the corporation shall be:

### **ARTICLE II PRINCIPAL OFFICE**

Principal street address  
3266 NW 84th Ave Apt. 635  
Sunrise, FL 33351

Mailing address, if different is:

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The mission of Daughters of Eden is to empower pregnant and parenting adolescents and their families to identify, pursue, and achieve personal goals through collaboration with community resources and advocacy in order to promote health, education, economic opportunity, and self-sufficiency.

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

Elected and appointed by search committee.

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

Name and Title: Kamilah Harris President  
Address: 3266 NW 84th Ave Apt. 635  
Sunrise FL

Name and Title: Sanyani Edwards Vice-President  
Address: P.O Box 44446  
Detroit, MI 48244

Name and Title: Nicolas Kellman Treasurer  
Address: 3266 NW 84th Ave Apt. 635  
Sunrise, FL 33351

Name and Title: Natilie Perkins Secretary  
Address: 10964 Pine  
Taylor, MI 48180

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: Kamilah Harris  
Address: 3266 NW 84th Ave Apt. 635  
Sunrise, FL 33351

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Kamilah Harris  
Address: 3266 NW 84th Ave Apt. 635  
Sunrise, FL 33351

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

Kamilah Harris

Required Signature of Registered Agent

July 15 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.

Kamilah Harris

Required Signature of Incorporator

July 15 2011

Date

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