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COVER LETTER

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

SUBJECT: 2 R.I.S.E INC						
	(PROPOSED CORPORAT	TË NAMË – <u>MUST INCLI</u>	UDE SUFFIX)			
Enclosed is an original	and one (1) copy of the Arti	cles of Incorporation and	d a check for:_			
\$70.00	\$78.75	\$78.75	\$87.50			
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,			
	Certificate of	& Certified Copy	Certified Copy			
	Status		& Certificate			
	,	ADDITIONAL CO	OPY REQUIRED			
	,					
FROM: Martinque Edmonds						
	Name (Pri	inted or typed)				
4911 Portsmouth avenue						
Address						
Jacksonville, Florida 32208						
City, State & Zip						
	• •	•				
786-859-6135						
4911 Portancianca Welcohone number						
To.Rise@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 II	PRINCIPAL OFFICE			
	Principal street address		Mailing address, if different is:	
	4911 Portsmouth Aveue	-		
	Jacksonville,Florida 32208	-		
ARTICLE III	PURPOSE			
The purpose for	which the corporation is organized is:			
	ire 2 Succeed 2 Evolve" To mentor,educate a	and support	teen and young adult women of ages 13-25.	
			Puval county communities, on positive chooses	
		ill be facilitat	ed by volunteer certified psychologists, health	
educators and	social workers.			
	MANNER OF ELECTION The manner in v		• •	
Officers will		-	le and executive board approval yearly.	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR		to DP or March and (Ton or or /Ton or)	
Name and 'I Address:	Fitle: Ciera Morris (CEO/Founder) 8880 Old Kings Rd,	Name and Ti Address:	itle: <u>D'iera Woodward (Treasure/Founder)</u> 600 Jimmy Ann Dr.	
Audiess.	Unit #71	Address:	Unit #2123	
	Jacksonville, Florida 32257		Daytona Beach, Florida 32114	
			•	
Name and T Address:	Fitle: Martingue Edmonds (Exec. Director/Founder) 4911 Portsmouth Ave	Name and T Address:	8300 Plaza Gate Lane	
	Jacksonville, Florida 32208			
		•	Jacksonville, Florida 32217	
	Sill News Description Districts (Co. 1)	>1 tm		
Name and I Address:	Fitle: Vanessa Douze(Asst.Director/Secretary/Founder) 5220 Bennington Dr.	Name and Ti Address:	8300 Plaza Gate Lane	
Audiess.	Jacsonville, Florida 32244	Audicss.	Unit # 1031	
<u>-</u>		•	Jacksonville, Florida 32217	
A DOMOLE UV	DECIOMEDED ACENT			
ARTICLE VI	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	the registered a	gent is:	
Name:	Martingue Edmonds	ine registered a	ECHE SEP	
Address:	4911 Portsmouth Avenue	i		
	Jacksonville, Florida, 32208	ı	AST 21 TH	
ARTICLE VII	INCORPORATOR			
	dress of the Incorporator is:		∂ 8 =	
Name:	Ciera Morris 2 R.I.S.E INC			
Address:	8880 Old Kings Rd.		»····	
	Unit #71 Jacksonville, Florida 32257			
	Jacksonville, Florida 32231			
Having been nan	ned as registered agent to accept service of proces.	s for the abov	e stated corporation at the place designated in this	
certificate, I am fa	imiliar with and accept the appointment as registere	d agent and ag	ree to act in this capacity	
M			Olnalani	
-11.	amonad		9/22/2011	
	Required Signature of Registered Agent		Date *	
submit this docu	ment and affirm that the facts stated herein are tru	e. I am aware	that any false information submitted in a document	
	of State constitutes a third degree felony as provide			
N -			A (0 - 1 0	
Lew /	his		9/22/2011	
	Required Signature of Incorporator		Data	