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COVER LETTER

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

SUBJECT: Motivate.Inspire.Encourage. Inc.					
	(PROPOSED CORPORAT	E NAME – <u>MUST INCL</u>	JDE SUFFIX)		
	•		•		
		•			
Enclosed is an original	and one (1) copy of the Artic	les of Incorporation and	d 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 CO	OPY REQUIRED		
FROM: Eugene N. Graham Jr.					
Name (Printed or typed)					
6424 Shortleaf Place					
Address					
Jacksonville, FL 32244					
City, State & Zip					
(904)551-0997					
Daytime Telephone number					

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

E-mail address: (to be used for future annual report notification)

mieteen@yahoo.com

ARTICLES OF INCORPORATION

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

	ni compilation vita compilation	 , (SPEDETALLED
	Motivate.Inspire.Encour	age. Inc.	SECRETARY OF STATE DIVISION OF CORPORATIONS
The name of the corp	oration shall be:	J	
ARTICLE II P	RINCIPAL OFFICE		12 MAY 29 AM !!: 14
ARTICLE II F	Principal street address		Mailing address, if different is:
	6424 Shortleaf Place		
	Jacksonville, FL 32244	_	
		-	
ARTICLE III	PURPOSE		
The purpose for which	ch the corporation is organized is:		
academic tutoring, seducational and con	emmunity offering positive activities for youth and summer camps, athletic and enrichment camps, a nmunity achievement recognition programs. This ler section 501(c)(3) of the Internal Revenue Cod	scholarship progration is or	ams, youth and parent consulting as well as ganized exclusively as a nonprofit organization
ARTICLE IV	MANNER OF ELECTION The manner in v	hich the director	s are elected and appointed:
	ned by the members of the board.		
	INITIAL OFFICERS AND/OR DIRECTOR		
	: Faith L. Roberts-Graham. President		
Address:	6424 Shortleaf Place		
	Jacksonville, FL 32244		
Mana and Title	:Eugene N. Graham, Jr. Vice President	Nome and Title	
Address:	6424 Shortleaf Place		
riuuross.	Jacksonville, FI 32244	110010001	
3.7 1.00%	Demonst tone Country	27	
Name and Title Address:	e: Damarra L. Jones, Secretary 1540 W 31st Street	Name and little Address:	•
Aduress.	Riviera Beach, FI 33404	Audress.	
	TATION DOGGET, 1 TOOTOT		
	REGISTERED AGENT		
The name and Florid Name:	la street address (P.O. Box NOT acceptable) of the Faith L. Roberts-Graham	he registered age	It is:
Name: Address:	6424 Shortleaf Place		
Audress.	Jacksonville, FL 32244		
	Jeans Million I L Dec 1		
	NCORPORATOR		•
Name:	ss of the Incorporator is: Eugene N. Graham, Jr.		
Address:	6424 Shortleaf Place		
	Jacksonville, FL 32244		
			•
YYt A -	• • •		
Having been named	as registered agent to accept service of process	for the above s	tated corporation at the place designated in this
certificate, I am jama	liar with and accept the appointment as registered	a agent and agre	e to act in this capacity
	IY WALL GIRTHALL		5/22/12
-\m\\	1 man & Mindin	 	-166/16
/ J	Required Signature of Registered Agent		Date
I submit this docume	nt and affirm that the facts stated herein are tru	e. I am aware th	at any false information submitted in a document
			, jj

State Constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature of Incorporator

Date