

N 12000006467

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

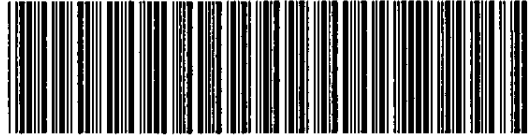
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Jessica Hinson **DATE**  
**AUTHORIZATION BY PHONE TO**  
**CORRECT** Articles I. + IV  
**DATE** 7/2/12  
**DOC. EXAM** MRD

Office Use Only



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06/29/12--01017--022 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 JUN 29 PM 4:01

FILED

MRD  
7/2/12

## COVER LETTER

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

SUBJECT: EMERY'S KIDS, <sup>INC.</sup> LLC  
(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: JESSICA HINSON

Name (Printed or typed)

2541 CENTENNIAL FALCON DR

Address

VALRICO, FL 33596

City, State & Zip

813-924-8642

2541 CENTENNIAL FALCON DR  
VALRICO, FL 33596

JESSICAHINSON916@GMAIL.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: **EMERY'S KIDS, INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
2541 CENTENNIAL FALCON DR.  
VALRICO, FL 33596

**FILED**  
12 JUN 29 PM 4:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
Mailing address, if different is \_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**CHARITABLE DONATIONS FOR THE WELL FARE OF LOCAL CHILDREN NEED.**

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

**APPOINTED**

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

Name and Title: JESSICA HINSON - President  
Address: 2541 CENTENNIAL FALCON DR  
VALRICO, FL 33596

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: ANNE MARIE JIOSNE  
Address: 15817 FISH HAWK FALLS DR  
LITHIA, FL 33547  
Vice-President

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: JESSICA HINSON  
Address: 2541 CENTENNIAL FALCON DR  
VALRICO, FL 33596

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: JESSICA HINSON  
Address: 2541 CENTENNIAL FALCON DR  
VALRICO, FL 33596

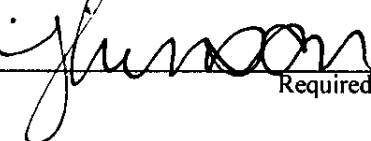
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



Required Signature of Registered Agent

6/24/12  
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

6/24/12  
Date