# N1200008140

(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:				

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FILED 12 AUG 23 PH 1: 12 CGRE IARY OF STATE LLAHASSTEL FLORIDA

Office Use Only

### **COVER LETTER**

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

## SUBJECT: JCHelp, 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 S78.75 Filing Fee & Certified Copy ADDITIONAL COPY REQUIRED

FROM: Samantha Springfield

Name (Printed or typed)

113 South Monroe Street

Address

Tallahassee, FL 32301

City, State & Zip

# 850.445.3144

113 SoulAndonrole Sphere number

# sam@jchelp.org

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

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

•	ARTICLES OF IN In compliance with Chapte		fion FILED	
<b>ARTICLE 1</b> The name of the cor	NAME poration shall be: JCHelp, I	nc.	for Profit) 12 AUG 23 PH 1: 12	
	PRINCIPAL OFFICE Principal street address 113 South Monroe Street		Mailing address, if differences: PO Box 2091	
	Tallahassee, FL 32301	-	Tallahassee, FL 32316	
ARTICLE III	PURPOSE			
The purpose for which the corporation is organized is: To provide families, youth, ex-convicts, and individuals with resources for a better				
quality of life seeking to permanently better themselves, including but not limited to: facilities, housing, meals, youth events, education, job and life skills programs.				
<u>ARTICLE IV</u> <u>MANNER OF ELECTION</u> The manner in which the directors are elected and appointed: As provided for in the bylaws.				
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	RS		
Name and Tit Address:	le: Samantha Springfield, President PO Box 2091	Name and Title Address:	e: <u>Jaworski Vance, Treasurer</u> PO Box 2091	
radiess.	Tallahassee, FL 32316		Tallahassee, FL 32316	
		-		
Name and Tit Address:	le:Steven Yates, Senior Vice President PO Box 2091	Name and Title Address:	e: <u>Monique Miller, Secretary</u>	
1444055.	Tallahassee, FL 32316		Tallahassee, FL 32316	
		_		
Name and Tit Address:	Je: Bernard McQueen, Vice President PO Box 2091	Name and Title Address:	PO Box 2091	
	Tallahassee, FL 32316	-	Tallahassee, FL 32316	
	<u>REGISTERED AGENT</u> ida street address (P.O. Box NOT acceptable) of	the registered age	ent is:	
Name: Address:	Samantha Springfield	-		
Address:	113 South Monroe Street Tallahassee, FL 32301	-		
		-		
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:				
Name:	Samantha Springfield			
Address:	113 South Monroe Street	-		
	Tallahassee, FL 32301	-		
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				
	$\int - \int - $		8/15/17	
<u> </u>	Required Signature of Registered Agent		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.				
	$\left(-\left(-\right)\right)$		8/15/12	
	Required Signature of Incorporator	<u> </u>	Date	

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