

NI2000009187

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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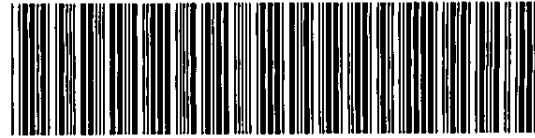
(Business Entity Name)

(Document Number)

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

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SEP 25 PM 1:05  
TALLAHASSEE, FLORIDA

FILED  
12 SEP 26 PM 1:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9/26/12

## COVER LETTER

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

SUBJECT: WE WILL BE HEARD 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: DECARDIOS DENSON  
Name (Printed or typed)

2696 FARINGTON D  
Address

TALLAHASSEE, FL 32311  
City, State & Zip

347-669-2185  
Daytime Telephone number

HANKPGS@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

FILED  
12 SEP 26 PM 1:57  
TALLAHASSEE, FLORIDA

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: WE WILL BE HEARD INC

**FILED**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
2696 FARINGTON DR  
TALLAHASSEE FL 32311

Mailing address, if different is: 12 SEP 26 PM 1:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: POLITICAL ACTION COMMITTEE

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

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

Name and Title: <u>DECARDIOS DENSON</u>	Name and Title: _____
Address: <u>2696 FARINGTON DR</u>	Address: _____
<u>TALLAHASSEE, FL 32311</u>	_____

Name and Title: <u>ADIA DENSON</u>	Name and Title: _____
Address: <u>7625 TALLY ANN DR</u>	Address: _____
<u>TALLAHASSEE FL 32303</u>	_____

Name and Title: <u>STEPHAINE BURKE GREEN</u>	Name and Title: _____
Address: <u>7625 TALLY ANN DR</u>	Address: _____
<u>TALLAHASSEE, FL 32303</u>	_____

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


Name: DECARDIOS DENSON  
Address: 2696 FARINGTON DR  
TALLAHASSEE, FL 32303

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Name: DECARDIOS DENSON  
Address: 2696 FARINGTON DR  
TALLAHASSEE, FL 32311

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

9-26-12  
\_\_\_\_\_  
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

9-26-12  
\_\_\_\_\_  
Date