

N12000009231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

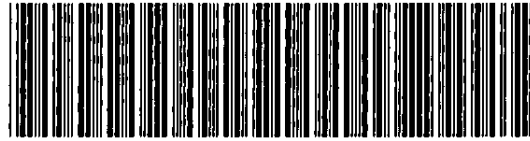
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/12/12--01015--011 **87.50

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96

W12-47483

COVER LETTER

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

SUBJECT: Two World's Collide 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: Samantha D. Sullivan

Name (Printed or typed)

3050 Log Cabin Lane

Address

Crestview, FL 32539

City, State & Zip

850-797-1939

3050 Log Cabin Lane Telephone number

samantha.d.sullivan@gmail.com

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
12 SEP 26 AM 11:00
FILING OFFICE

September 14, 2012

SAMANTHA D. SULLIVAN
3050 LOG CABIN LN
CRESTVIEW, FL 32539

SUBJECT: TWO WORLD'S COLIDE
Ref. Number: W12000047483

We have received your document for TWO WORLD'S COLIDE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The registered agent must sign accepting the designation.

Section 617.0803, Florida Statutes, requires that the board of directors never have fewer than three directors.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason
Regulatory Specialist II

Letter Number: 312A00023157

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: **Two Worlds Collide Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
3050 Log Cabin Lane
Crestview, FL 32539

Mailing address, if different is:

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of Two Worlds Collide is to advocate and bridge the gap between those currently incarcerated in Louisiana with the general public world. Louisiana has the highest incarceration rate in the entire world. Prison Reform is necessary to revamp sentencing and give offenders a second chance at life after receiving rehabilitation.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

Directors will be elected by voting upon by the current officers and board. Appointment will take place after the vote is decided.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Charles Rodgers Co-Director
Address: 1400 W. Irene Street
Zachary, LA 70791

Name and Title: _____
Address: _____

Name and Title: Dominique Legree Co-Director
Address: 3050 Log Cabin Lane
Crestview, FL 32539

Name and Title: _____
Address: _____

Name and Title: Mona Sullivan Co-Director
Address: 3050 Log Cabin Lane
Crestview, FL 32539

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: Samantha Sullivan
Address: 3050 Log Cabin Lane
Crestview, FL 32539

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Samantha Sullivan
Address: 3050 Log Cabin Lane
Crestview, FL 32539

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

Sant D. Dell

Required Signature of Registered Agent

9/20/12

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.

Sant D. Dell

Required Signature of Incorporator

9/20/12

Date

12 SEP 26 AM 7:41