

N13000006632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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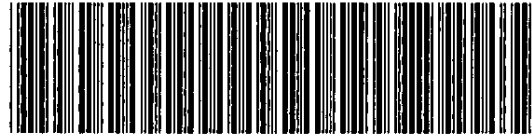
(Business Entity Name)

(Document Number)

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13 JUL 22 PM 12:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
7/25/13

COVER LETTER

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

SUBJECT: Her Song, 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: Rachel White
Name (Printed or typed)

7235 Bonneval Rd. Ste. 121
Address

Jacksonville, FL 32256
City, State & Zip

904.401.7070
Daytime Telephone number

rachel@counselingbyrachel.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: Her Song, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address:

7235 Bonneval Rd. Ste 121
Jacksonville, FL 32256

Mailing address, if different is:

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: counseling services for girls & women
and restorative residential services for young women who
have been sexually exploited or abused (sex trafficking
victims)

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: Rachel White, M.A. Name and Title: _____

Address: 7235 Bonneval Rd. Ste 121 Address: _____
Jacksonville, FL
32256

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name:

Rachel White

Address:

7235 Bonnaval Rd. Ste. 121
Jacksonville, FL 32256

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Rachel White

Address:

7235 Bonnaval Rd. Ste. 121
Jacksonville, FL 32256

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

7-17-2013

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

7-17-2013

Date