

NI 300000 9553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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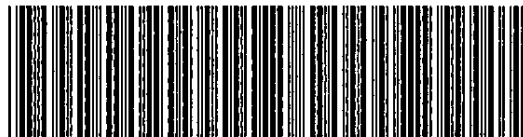
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 SEP 18 PM 3:14

9/23/13

COVER LETTER

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

SUBJECT: Sisters of Ethiopia, 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: Trina M. Waller
Name (Printed or typed)

2640 54th Ave S, Apt #56
Address

Saint Petersburg, FL 33712
City, State & Zip

(929) 234-0793
Daytime Telephone number

teinawaller@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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 SEP 18 PM 3:14

ARTICLE I NAME

The name of the corporation shall be: Sisters of Ethiopia Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:

2640 54th Ave S

Apt. #56

Saint Petersburg, FL 33712

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: We are a community based
socio. that benefits the community of St. Petersburg
thru charity and fundraising. Based upon the
principles of the Order of the Eastern Star.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: annual
vote every year in December

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Trina Waller, Pres.

Address: 2640 54th Ave S
Apt. #56
Saint Petersburg, FL 33712

Name and Title: Joshua Roundtree, Advisor

Address: 509 42nd Ave. S
Saint Petersburg, FL
33712

Name and Title: Kimekeshia Barker, 1st Vice

Address: 2640 54th Ave S
Apt. #56
Saint Petersburg, FL 33712

Name and Title: Cliff Williams, 2nd Vice

Address: 1356 30th Street S
Saint Petersburg, FL
33712

Name and Title: Latesha Canady, Sec

Address: 2640 54th Ave S
Apt. #56
Saint Petersburg, FL 33712

Name and Title: Ronald Flucker, 3rd Vice

Address: 4201 3rd Ave S
Saint Petersburg, FL
33711

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: TRINA M. Waller

Address: 2640 54th Ave S., Apt #56
St. Petersburg, FL 33712

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Trina M. Waller

Address: 2640 54th Ave. S., Apt. #56
St. Petersburg, FL 33712

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

Trina M. Waller
Required Signature of Registered Agent

9/16/13
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.

Trina M. Waller
Required Signature of Incorporator

9/16/13
Date