

N1300008915

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

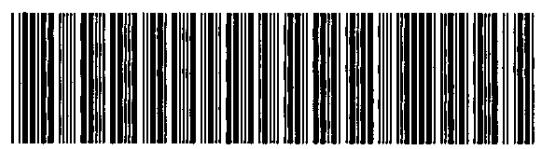
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 OCT - 1 PM 2:39

Ps 10/2/13

COVER LETTER

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

SUBJECT: **Empowering Tomorrow, 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: **Shari D. Phillips**

Name (Printed or typed)

6627 Turnstone Lane

Address

Lakewood Ranch, FL 34202

City, State & Zip

315-559-9550

Daytime Telephone number

shari.phillips5@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)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be: Empowering Tomorrow, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address:
6627 Turnstone Lane

Mailing address, if different is:

Lakewood Ranch, FL 34202

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide an education based mentoring program
that teaches awareness, encouragement and leadership, as the foundation in
the development of mentors and mentees.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: _____

Directors will be appointed

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shari Phillips

Address: 6627 Turnstone Lane
Lakewood Ranch, FL 34202

Name and Title: Doug Phillips

Address: 6627 Turnstone Lane
Lakewood Ranch, FL 34202

Name and Title: Tiffany Flynn

Address: 5507 Raventhorpe Way
Clay, NY 13041

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

13 OCT - 1 PM 2:39

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:

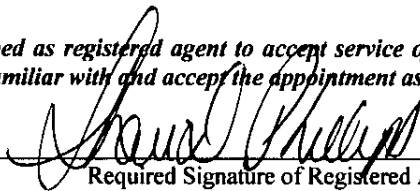
Name: Shari D. Phillips
Address: 6627 Turnstone Lane
Lakewood Ranch, FL 34202

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Shari D. Phillips
Address: 6627 Turnstone Lane
Lakewood Ranch, FL 34202

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

9/24/2013
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

9/24/2013
Date