

N13000009044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

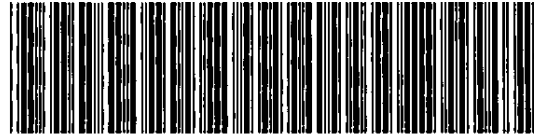
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF REGISTRATION

APPROVED
AND
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13 OCT -4 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VIT

COVER LETTER

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

SUBJECT: Lake Jackson Educational Foundation, 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: Jo Gathers
Name (Printed or typed)

P.O. Box 12663
Address

Tallahassee, FL 32317
City, State & Zip

850-702-6947
Daytime Telephone number

jgathers@yahoo.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: LAKE JACKSON Educational Youth Foundation, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:

3846 North Monroe St.
Suite 304
Tallahassee, FL 32303

Mailing address, if different is:

P.O. Box 12663
Tallahassee, FL 32317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Non Profit Organization
After School, tutoring and Homework Center

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

By Registered Agent Indefinitely

Directors
Appointed

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: To Gathers, Ex. Dir.

Address

3631 Fred George Ct
Tallahassee, FL 32303

Name and Title: James McMillan, Off.

Address

612 Howard Avenue
Tallahassee, FL 32310

Name and Title: Gregory Gathers, Off.

Address

3631 Fred George Ct
Tallahassee, FL 32303

Name and Title: Nate Washington, Jr., Off.

Address

5607 Langhorne Ct.
Tallahassee, FL 32315

Name and Title: Mr. James Moran, Off.

Address

1908 Bobby Davis
Tallahassee, FL 32303

Name and Title:

Address:

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

APPROVED
FILED

13 OCT -4 PM 2:57

SECRET
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: _____

Address: _____

To Gathers
3631 Fred George Court
Tallahassee, FL 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: _____

Address: _____

To Gathers
3631 Fred George Ct.
Tallahassee, FL 32303

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

To Gathers

Required Signature of Registered Agent

10-1-2013
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.

To Gathers

Required Signature of Incorporator

10-1-2013
Date