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(Req	uestor's Name)				
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PICK-UP	MAIT	MAIL			
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Certified Copies	Certified Copies Certificates of Status				
Special Instructions to F	iling Officer:				
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14 JAN 30 PM 1:09





COVER LETTER

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

SUBJECT: Let's R.E.A.C.H. MC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

FROM: Standly
Name (Printed or Typed)

3025 S ad ams Street
Address

Tallahassee F1 32301
City, State & Zip

321-242-4912

Daytime Telephone number

E-mail address: (10 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)



The name of the corporation shall be: Let's R.E.A	.CH. 17C. 14 JAN 30 PH 1: 09
ARTICLE II PRINCIPAL OFFICE	
Principal <u>street</u> address: 3825 S adams Street	Mailing address, if different is: Fig. ORIDA
Tallahassee F1 Apt 3	36
32301	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	encourage the youth to
	nal journey at a higher
level institution or reac	in toward a career apail to
their satis complete best	We WILL provide mentors from-
	nat will inspire them to do
better and be the best. Nor	
	er in which the directors are elected and appointed: President E. Standley & Alexis D. Jones CTORS
Name and Title: Albris D. Jones - CEO No	ame and Title: <u>ASMINE</u> Standby - President
Address 3025 sadams street A	idress: 3025 s adams stree +
Aprt : 435	Apt 336
Tallahasse F1 32301	Talanassee, FI 32301
Name and Title: Name	,
Address A	idress:
Name and Title: Na	me and Title:
Address Address	idress:



Name and Title:_		Name and Title:		
Address	······································	Address:	14 JAN 30	PM 1: 09
_			ALL	₹ FLORIDA
Name and Title:_		Name and Title:		
Address		Address:		
				
		·		
ARTICLE VI	REGISTERED AGENT			
	orida street address (P.O. Box NOT acce	ptable) of the registered agent	is:	
Name:	Alexis D. Jones			
Address:	3025 s adams	street		
	Tallahasse, Flag	0+43S		
	32301			
ARTICLE VII	INCORPORATOR dress of the Incorporator is:			
i ne <u>name ano ao</u>		ć.		
Name:	Jasmine Standle	<u>y</u>		
Address:	3025 s adams			
	Tallahassee, Fla	not 336		
	32301			
certificate, I am fa	ned as registered agent to accept service imiliar with and accept the appointment a	of process for the above states is registered agent and agree t	ed corporation at the oact in this capacity	place designated in this
Chex ic	Required Signature of Registered	Agent	1/30	
	ment and affirm that the facts stated here of State constitutes a third degree felony M	as provided for in s.817.155, i		submitted in a document $0/2014$
1	Required Signature of Incor	porator	7	Date