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SECRETARY OF THE  
TALLAHASSEE, FLORIDA

2 04/22/14

## COVER LETTER

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

SUBJECT: Elect Paula, 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: Paula Bartlett/Bartlett Law, P.A.

Name (Printed or typed)

4741 Atlantic Blvd Suite E-4

Address

Jacksonville, FL 32207

City, State & Zip

(904) 419-8417

Daytime Telephone number

paulabartlett@bartlettlawpa.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: Elect Paula, Inc.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address:  
4741 Atlantic Blvd Suite E-4  
Jacksonville, FL 32207

Mailing address, if different is:

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: Principal political organization for fundraising  
and campaigning for Paula Moser-Bartlett.

**ARTICLE IV    MANNER OF ELECTION**

The manner in which the directors are elected and appointed: According to bylaws

**ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Paula Moser-Bartlett, Dir  
Address: 1216 Nightingale Ct.  
Jacksonville, FL 32216

Name and Title: Samuel Bartlett, Dir  
Address: 1216 Nightingale Ct.  
Jacksonville, FL 32216

Name and Title: Danielle Walker-Kelshall, Dir  
Address: P.O. Box 380072  
Jacksonville, FL 32205

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: Paula Moser-Bartlett/Bartlett Law, P.A.

Address: 4741 Atlantic Blvd Suite E-4  
Jacksonville, FL 32207

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Paula Moser-Bartlett/Bartlett Law, P.A.

Address: 4741 Atlantic Blvd Suite E-4  
Jacksonville, FL 32207

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TALLAHASSEE, FLORIDA

*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*

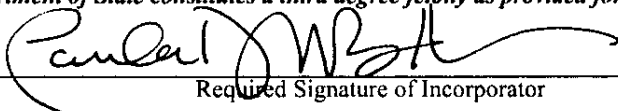


Required Signature of Registered Agent

04/16/2014

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

04/16/2014

Date