

N14000006169

(Requestor's Name)

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☐ PICK-UP

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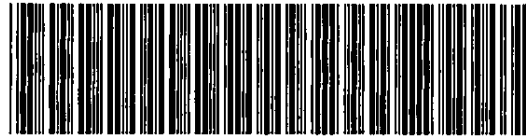
(Business Entity Name)

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DIVISION OF CORPORATIONS
14 JUN 26 PM 12:09

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N14000006169
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COVER LETTER

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

SUBJECT: Northeast Florida Association of Black Journalists
(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: Northeast Florida Association of Black Journalists
Name (Printed or typed)

1070 East Adams Street
Address

Jacksonville, Florida 32202
City, State & Zip

(904) 323-8322 or (418) 456-0830
Daytime Telephone number

nfabj@gmail.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 9, 2014

KHRISTOPHER BROOKS
1070 EAST ADAMS STREET
JACKSONVILLE, FL 32202

SUBJECT: NORTHEAST FLORIDA ASSOCIATION OF BLACK JOURNALISTS
Ref. Number: W14000035555

We have received your document for NORTHEAST FLORIDA ASSOCIATION OF BLACK JOURNALISTS and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document is illegible and not acceptable for imaging.

We need the original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Carol Mustain
Regulatory Specialist II

Letter Number: 814A00012336

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Northeast Florida Association of Black Journalists, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Northeast Florida Association Black Journalists, Inc

1070 East Adams Street

Jacksonville, Florida 32202

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to bring about a union of journalists dedicated to truth and excellence
in the news and full equality of the industry in order: to expand and balance the media's coverage of the black community
and the black experience, to encourage students to identify careers in journalism, to actively seek out and identify
opportunities for black journalists and to serve Northeast Florida's premiere online clearinghouse for such opportunities, to
assist black journalists in enhancing their skills for upward mobility toward managerial and supervisory positions, to
strengthen the ties between blacks who work in a majority-owned media and blacks who work in black-owned media

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: six board members
are elected at the end of December and will serve one-year terms.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Khristopher J. Brooks, president

Address: 9803 Creekfront Road
Apartment 407
Jacksonville, Florida 32256

Name and Title: Kumasi Aaron, vice president

Address: 31 West Adams Street
Jacksonville, Florida 32202

Name and Title: Romney Smith, parliamentarian

Address: 4090 Hodges Blvd
Apartment 2201
Jacksonville, Florida 32224

Name and Title: Erika Adolphus, vice president

Address: 653 Monument Road
Apartment 1317
Jacksonville, Florida 32225

Name and Title: David Williams, secretary

Address: 8539 Gate Parkway West
Apartment 424
Jacksonville, Florida 32216

Name and Title: Deprina Godboldo, treasurer

Address: 9803 Creekfront Road
Apartment 407
Jacksonville, Florida 32256

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUN 26 PM 12:05

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: Khristopher J. Brooks
Address: 9803 Creekfront Road, Apartment 407
Jacksonville, Florida 32256

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Erika Adolphus
Address: 653 Monument Road, Apartment 1317
Jacksonville, Florida 32225

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

#1 Khristopher J. Brooks
Required Signature of Registered Agent

06/21/2014
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.

Erika S. Adolphus
Required Signature of Incorporator

6/21/2014
Date