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SPECIAL DELIVERY
TALLAHASSEE FL 32310

COVER LETTER

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

SUBJECT: Project Loved 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: Annelien Williamson
Name (Printed or typed)

101-A Wood Duck Circle
Address

Daytona Beach, FL 32119
City, State & Zip

(910) 508-8340
Daytime Telephone number

projectloved@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: Project Loved Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

425 Champion Ridge Dr.
Daytona Beach FL 32124

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of Project Loved Inc. is to enrich, empower and uplift children of poverty around the world by enabling educational opportunities. The goals are to conduct fundraisers and events, sell merchandise, plan mission trips and obtain sponsorships that will fund educational scholarships to break the cycle of poverty for the child, their families and their communities at large.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Annual

written nominations elected by voting.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Maria Lucrecia Olds</u>	Name and Title: <u>Annelien Williamson</u>
Address: <u>President</u>	Address: <u>Vice-President / Secretary</u>

425 Champion Ridge Dr.
Daytona Beach FL 32124

101-A Wood Duck Cir
Daytona Beach, FL 32119

Name and Title: <u>Andries Mathys Liebenberg</u>	Name and Title: _____
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Address: <u>Media Director / PR</u>	Address: _____
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780 Rose Ranch Rd
San Marcos, CA 92069

Name and Title: _____	Name and Title: _____
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Address: _____	Address: _____
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FILE
14 AUG 25 AM 8:02

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: Maria Lucrecia Olds

Address: 425 Champion Ridge Dr.

Daytona Beach, FL, 32124

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TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Annelien Williamson

Address: 101-A Wood Duck Circle

Daytona Beach, FL, 32119

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

Maria Lucrecia Olds

Required Signature of Registered Agent

08-19-14

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.

A Williamson

Required Signature of Incorporator

08-19-14

Date