

N14000009022

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

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W1400009022

SEP 29 2014

T. SCOTT



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08/25/14--01021--024 \*\*87.50

SEP 26 AM 10:50  
DIVISION OF CORPORATE AFFAIRS  
SECRETARY OF STATE



RECEIVED

FLORIDA DEPARTMENT OF STATE 14 SEP 26 AM 11:06  
Division of Corporations

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

August 28, 2014

09/24/14

LACHICA SPENCER

P.O. BOX 8024  
LAKELAND, FL 33802

SUBJECT: ZETA PHI BETA SORORITY, INC.  
Ref. Number: W14000052324

*The necessary  
adjustments have  
been completed.*  
*JS*

We have received your document for ZETA PHI BETA SORORITY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.  
<http://www.sunbiz.org/titledef.html>.

Please return the corrected original and one copy of 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.

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

Letter Number: 114A00018351

COVER LETTER

*corrected*

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

07/24/14 *[Signature]*  
ZETA PHI BETA SORORITY, INC. (*Gamma Phi Zeta chapter*)  
(~~Gamma Phi Zeta Chapter~~)

SUBJECT: \_\_\_\_\_

(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: LACHICA SPENCER  
Name (Printed or typed)

P.O. BOX 8024  
Address

LAKELAND, FL 33802  
City, State & Zip

(863) 934-0270  
Daytime Telephone number

SOFLYBLUEPHIZETA@GMAIL.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)

corrected

09/24/14

**ARTICLE I NAME**

ZETA PHI BETA SORORITY, INC.

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

105 Heatherwood Blvd

Lake Wales, FL 33859

Mailing address, if different is:

P.O. BOX 8024

LAKELAND, FL 33802

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To promote the cause of education by

encouraging the highest degree of excellence in scholarship, uplifting worthwhile

projects within the community, fostering the spirit of sisterly love and the  
fundamentals of finer womanhood.

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

as provided for in the bylaws.

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

Name and Title: Jacquelyn Bobb / President Name and Title: Kareen Coleman / 1st VP

Address: P.O. BOX 8024 Address: P.O. BOX 8024  
LAKELAND, FL 33802 LAKELAND, FL 33802

Name and Title: Juanita Mack / 2nd VP Name and Title: Laurie Williams / Sec

Address: P.O. BOX 8024 Address: P.O. BOX 8024  
LAKELAND, FL 33802 LAKELAND, FL 33802

Name and Title: LaChica Spencer / Treas Name and Title: Crystal Brown / Fin. Sec

Address: P.O. BOX 8024 Address: P.O. BOX 8024  
LAKELAND, FL 33802 LAKELAND, FL 33802

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Name and Title: Dora Blackshear / ~~Parliam~~ Name and Title: Ethyl Mussington / ~~Chaplain~~  
Address: P.O. BOX 8024 Address: P.O. BOX 8024  
LAKELAND, FL 33802 LAKELAND, FL 33802

Name and Title: Tameka Monroe / ~~Historian~~ Name and Title: \_\_\_\_\_  
Address: P.O. BOX 8024 Address: \_\_\_\_\_  
LAKELAND, FL 33802 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Jacquelyn Bobb  
Address: 105 Heatherwood Blvd  
Lake Wales, FL 33859

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: LaChica Spencer  
Address: P.O. BOX 8024  
LAKELAND, FL 33802

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

Jacquelyn Bobb  
Required Signature of Registered Agent (Bobb)

8/9/14  
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.

LaChica Spencer  
Required Signature of Incorporator (Spencer)

08/11/2014  
Date