N14000010593

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☑ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status ✓

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TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: Let Your Light Shine Corp.
(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: Juliet Bond
Name (Printed or typed)

1311 NW 195 ST
Address

Miami, Fl 33169
City, State & Zip

305-244-6525
Daytime Telephone number

bondj305@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: Let Your Light Shine Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address: 1311 NW 195 ST, Miami, Fl 33169

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Providing trouble young adults with assistance

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

Through votes

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Juliet Bond, President

Address: 1311 NW 195 ST, Miami, Fl 33169

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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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: Juliet Bond

Address: 1311 NW 195 ST Miami, Fl 33169

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Juliet Bond

Address: 1311 NW 195 ST Miami, Fl 33169

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.

Juliet Bond — 11-5-2014

Required Signature of Registered Agent — 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.

Juliet Bond — 11-5-2014

Required Signature of Incorporator — Date

14 NOV 18 PM 1:35

APPROVED AND FILED

SECRETARY OF STATE TALLAHASSEE, FLORIDA