# N15000000602

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
ੇਸ਼ Office Use Only



01/15/15--01002--002 \*\*78.75

SECREMARY OF STATE

1 21.15 ch

COVER LETTER

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

## SUBJECT: Just 4 U Productions, 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 S78.75 Filing Fee & Certified Copy

State State

. 54

#### ADDITIONAL COPY REQUIRED

FROM: Anthony C. Felton

Name (Printed or typed)

#### 50 Fischer Lane

Address

## Palm Coast, FL 32137

City, State & Zip

#### 386-569-6485

Daytime Telephone number

### stilliweep@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)

ъ

¢

The name of t	he corporation shall be: Just 4 U Proc	ductions, I		_
<u>ARTICLE I</u>	PRINCIPAL OFFICE			
50	Principal <u>street</u> address: Fischer Lane Palm Coast, FL 3213	7	Mailing address, if different is:	
	•		•	
		<del> </del>		
	for which the corporation is organized is:		of Just 4 U Productions, Inc. to en our youth in exhibiting healthier	
behavior	5. Utilizing stage re-enactments,	our intent is	to address the very issues confro	onting .
this targe	eted population on a daily basi	s. These iss	sues will include, but are not lim	ited;to:
Abuse (S	exual, physical, and emotional), b	ullying, Suic	ide, School shootings, Racism, and	d more.
	** *** ********************************			<u> </u>
	······································	· · · · · · · · · · · · · · · · · · ·	Ze 5	-
ARTICLE I	V MANNER OF ELECTION The ma	annas in uchiah the	dimension of a started and a saving of the free	mbers
· · · · · · · · · ·	ard of Directors will be voted in by		10	
			The second se	
ARTICLE	V INITIAL OFFICERS AND/OR DI	RECTORS	LOR	
Name and Tit	le: Anthony Felton-President	Name and Title	Emma Adams-Secretary	-
Address	50 Fischer Lane	Address:	32 Breeze hill Lane	
	Palm Coast, FL 32137		Palm Coast, FL 32137	
	······································		· · · · · · · · · · · · · · · · · · ·	
Name and Tit	Roburt Duma-Vice President	Name and Title	Carlos Butler-Recruiting	
Address	146 Plam Coast Resort Blvd	Address:	45 Cedar point Dr.	
	Apt. 402 Plam Coast Fl	, , <b>, , , , , , , , , , , , , , , , , </b>	······································	
	32137		· · · · · · ·	
Name and Tit	e: Stephanie Robinson-Treasurer	Name and Title:		
Address .	2 Butterfield Butterfield Dr.	Address:	<u> </u>	•
LYAA1699 ·	Palm Coast, FL 32137		· · · · · · · · · · · · · · · · · · ·	

Name and Title:	Name and Title:
Address	Address:
	·
	· · · · · · · · · · · · · · · · · · ·
	• •
lame 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:	Anthony Felton-President		
Address:	50 Fischer Lane		
	Palm Coast, FL 32137		

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Anthony Felton-President

Name:

Address:

50 Fischer Lane

Palm Coast, FL 32137

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

C. <u>F</u> <u>Cllon</u> 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.

Required Signature of Incorporator