N15000003629

(Requestor's Name)

(Address)

(Address)

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15 APR -8 PM 4:09

4/13

COVER LETTER

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

SUBJECT: Women Of Modest Beauty 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: Wilsonja Michele Graydon
Name (Printed or typed)

14200 Corkwood Ln
Address

Astatula Fl. 34705
City, State & Zip

407-242-0056
Daytime Telephone number

Wmustaqcem_g@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: Women Of Modest Beauty Inc.

ARTICLE II PRINCIPAL OFFICE

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Principal **street** address:	Mailing address, if different is:
14200 Corkwood Ln Astatula Fl 34705	

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Women Of Modest Beauty Inc.'s purpose/mission is to serve and nurture the need(s) (hunger, shelter, clothing, health, education, Motivational Counseling, etc.) of the world one community at a time.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Each director is elected based on how much he/she serves and interacts within the community.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: President Wilsonja M. Graydon	Name and Title: Wiley K. Graydon IV / Secretary
Address: 14200 Corkwood Ln Astatula Fl 34705	Address: 14200 Corkwood Ln Astatula Fl. 34705
Name and Title: Wiltonja L. Williams/Director	Name and Title: Robbie Chattmon/Director
Address: 215 N. Broadway St Apt 22 Albany, Ga 31705	Address: 2307 N. Davis St. Apt G Albany, GA. 31701
Name and Title: Tracy Colbert/Director	Name and Title: Christina William/Director
Address: 2304 Forest Glen Dr. Albany, GA 31707	Address: 714 Guam Circle Beaufort, SC 29902

Name and Title: Mahasin Majed / Director

Address: 2710 Cambridge Rd
Albany, Ga 31707

Name and Title: Carolyn Lovett Knighton / Director

Address: 1578 US 19 South Apt 1710
~~Albany~~ Leesburg GA 31763

Name and Title: Waseme Graydon / Director

Address: 14200 Corkwood Ln
Astatula, Fl 34705

Name and Title:

Address:

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ARTICLE VI REGISTERED AGENT

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

Name: Wilsonja Michele Graydon

Address: 14200 Corkwood Ln
Astatula Fl 34705

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Wilsonja Michele Graydon

Address: 14200 Corkwood Ln
Astatula Fl 34705

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

Wilsonja Michele Graydon
Required Signature of Registered Agent

4/6/15
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.

Wilsonja Michele Graydon
Required Signature of Incorporator

4/6/15
Date