

N1500000 6945

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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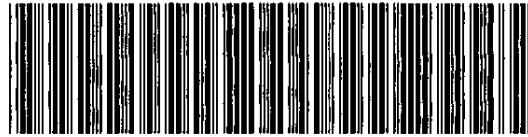
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

#005

7/20/15

COVER LETTER

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

SUBJECT: Vito Moja, 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: Ms. Deborah Maina

Name (Printed or typed)

12212 Rolling Green Ct.

Address

Jacksonville, FL 42246

City, State & Zip

(904) 303-2040

Daytime Telephone number

sandbcpa@comcast.net

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: Vito Moja, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
12212 Rolling Green Ct.

Jacksonville, FL 42246

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Corporation is organized exclusively for charitable, educational, and scientific purposes, including, the making of distributions to organizations that qualify as exempt under section 501(c)(3) of the Internal Revenue Code. No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except the Corporation may pay reasonable compensation for services rendered in furtherance of its purpose. No substantial part of the activities shall consist of the carrying on of propaganda or otherwise attempting to influence legislation. Upon winding up and dissolution of the Corporation, the assets of the Corporation remaining after payment of all debts shall be distributed to an exempt 501(c)(3) organization.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: As stated in bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Deborah Maina, Director, President, CEO

Address: 12212 Rolling Green Ct.

Jacksonville, FL 42246

Name and Title: Marilyn Richards, Director, Secretary

Address: 12212 Rolling Green Ct.

Jacksonville, FL 42246

Name and Title: Dana Riley, Director, Treasurer

Address: 12212 Rolling Green Ct.

Jacksonville, FL 42246

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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SECRETARY OF STATE
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: Mark Snipes

Address: 7 Seabass Lane

Ponte Vedra Beach, FL 32082

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Deborah Maina

Address: 12212 Rolling Green Ct.

Jacksonville, FL 42246

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Required Signature of Registered Agent

7/6/2015
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

7/6/2015
Date