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COVER LETTER

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

SUBJECT: The Tech Project 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: Jamie Rost

Name (Printed or typed)

1482 Hemingway Blvd

Address

Rockledge, FL 32955

City, State & Zip

321-591-4309

Daytime Telephone number

Jamie@thetechproject.org

E-mail address: (to be used for future annual report notification)

OFFICE OF STATE
CORPORATIONS, FLORIDA

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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: The Tech Project Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1482 Hemingway Blvd
Rockledge, Fl 32955

Mailing address, if different is:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of The Tech Project is to provide educational services to assist individuals with special needs, our at risk youth, life challenged (economic hardship, domestic violence, abuse, etc), veterans and elderly use technology to improve their lives by developing new marketable skills. Our programs celebrate the uniqueness of each person and are designed to help develop essential skills using technology that can be used to enter a career, identify new interests, connect with support resources and be a part of a group in an encouraging and safe environment.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Directors shall be elected by the board of directors. Voting for the election of directors shall be by written ballot. Each director shall cast one vote per candidate, and may vote for as many candidates as the number of candidates to be elected to the board.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jamie Rost, President

Address: 1482 Hemingway Blvd
Rockledge, FL 32955

Name and Title: Amanda Rost, Vice President

Address: 1482 Hemingway Blvd
Rockledge, FL 32955

Name and Title: Michael W. Lowe, Trustee

Address: 3848 Lexmark Ln
Unit 103
Rockledge, Fl 32955

Name and Title: TBD, Trustee

Address: _____

Name and Title: TBD, Trustee

Address: _____

Name and Title: TBD, Trustee

Address: _____

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: Jamie Rost
Address: 1482 Hemingway Blvd
Rockledge, FL 32955

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jamie Rost
Address: 1482 Hemingway Blvd
Rockledge, FL 32955

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

9/9/15
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.

Required Signature of Incorporator

9/9/15
Date

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA