

NIS000010421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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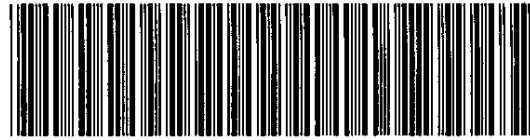
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Project Purpose, 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: Kelvin Lewis
Name (Printed or typed)

14350 Millhopper Road
Address

Jacksonville, FL 32258
City, State & Zip

904-955-4146
Daytime Telephone number

projectpurposetoday@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: Project Purpose, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

14350 Millhopper Road
Jacksonville, FL 32258

Mailing address, if different is:

P.O. Box 550949
Jacksonville, FL 32255

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Project Purpose is a community and faith-based organization, organized to impact, empower and serve the residents of the 32206 zip code of Jacksonville, Florida, through a variety of trainings, interventions and support that seek to improve their health, welfare and social-economic status.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Directors are appointed by a majority vote of the Board of Directors.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: President
Kelvin L. Lewis

Address: 14350 Millhopper Rd
Jacksonville, FL
32258

Name and Title: Gwendolyn P. Lewis

Address: Vice-President
14350 Millhopper Road
Jacksonville, FL 32258

Name and Title: Shannon E. Johnson

Address: Vice-President
10890 Campus Heights Lane
Jacksonville, FL 32218

Name and Title: Denise J. Johnson
Vice-President
10890 Campus Heights Lane
Jacksonville, FL 32218

Name and Title: Raymond Bentley

Address: Vice-President
1119 W. 26th St
Jacksonville, FL 32209

Name and Title: _____

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:

Address:

Kelvin L. Lewis
14350 Millhopper Road
Jacksonville, FL 32258

ARTICLE VII INCORPORATOR

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

Name:

Address:

Kelvin L. Lewis
14350 Millhopper Road
Jacksonville, FL 32258

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

Kelvin L. Lewis

Required Signature of Registered Agent

10-14-15

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.

Kelvin L. Lewis

Required Signature of Incorporator

10-14-15

Date