

N16000000094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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T. SCOTT



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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 8, 2015

DANIELLE JOHNSON
P.O. BOX 1376
ORLANDO, FL 32802-1376

SUBJECT: OPEN ARMZ CORPORATION
Ref. Number: W15000079063

We have received your document for OPEN ARMZ CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 515A00025676

COVER LETTER

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

SUBJECT: OPEN ARMZ CORPORATION

(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: DANIELLE JOHNSON

Name (Printed or typed)

501 W LANCASTER RD

Address

ORLANDO, FL 32809

City, State & Zip

407-443-3888

Daytime Telephone number

JOHNSON777D@GMAIL.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: OPEN ARMZ CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address:
501 W LANCASTER RD

ORLANDO, FL 32809

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO PROVIDE SERVICES FOR EDUCATIONAL SUPPORT,
HOUSING LOCATOR, CLOTHING AND FINANCIAL ASSISTANCE IN HOPES OF UPLIFTING EVERYONE IN
PROMOTING SUCCESSFUL LIVES WHICH WILL IMPROVE OUR COMMUNITIES

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: APPOINTED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DANIELLE JOHNSON - PRESIDENT

Address: 501 W LANCASTER RD
ORLANDO, FL 32809

Name and Title: CHYNA JOHNSON - VICE PRESIDE

Address: 501 W LANCASTER RD
ORLANDO, FL 32809

Name and Title: CHRISTIAN JOHNSON - SECRETARY

Address: 501 W LANCASTER RD
ORLANDO, FL 32809

Name and Title: MONIQUE MCCRAY - TREASUREI

Address: 501 W LANCASTER RD
ORLANDO, FL 32809

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

15 DEC 22 AM 9:50

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: MONIQUE MCCRAY

Address: 501 W LANCASTER RD
ORLANDO, FL 32809

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DANIELLE JOHNSON

Address: 501 W LANCASTER RD
ORLANDO, FL 32809

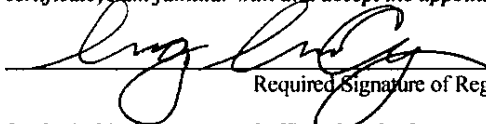
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: JANUARY 1, 2016 (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

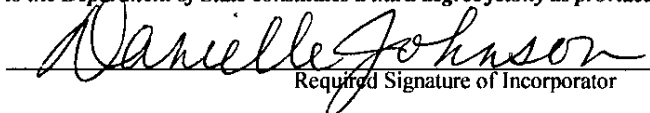


Required Signature of Registered Agent

12-28-15

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

12/28/15

Date