

N16000005020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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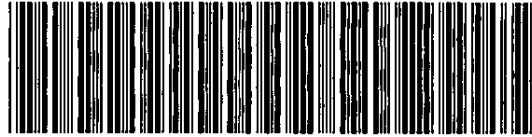
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE FLORIDA

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COVER LETTER

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

SUBJECT: ONE3, 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: Arielle Adams

Name (Printed or typed)

334 Corona Del Mar St.

Address

Lakeland, FL 33809

City, State & Zip

317-987-7321

Daytime Telephone number

brandon.one3@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: ONE3, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
334 Corona Del Mar St.

Lakeland, FL 33809

Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To strengthen our community and families by providing them an
opportunity to practice self-care, build character, and flourish in life through the love and direction of Christ. Our vision is a
community enjoying lives of prosperity with children leading the way through being actively engaged in taking care of their health.
Through sport leagues, gardening programs, cooking classes, and music groups we invite the youth of our community to gain
knowledge and experience that leads to prosperous lives. Family members are encouraged to participate alongside their children
to grow together in leading healthy lifestyles: physically, emotionally, and spiritually.

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

The board of directors will be self-appointed. Current board members or team members may nominate.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Brandon Adams, Chair</u>	Name and Title:	<u>Judith Ruiz, Program Officer</u>
Address	<u>334 Corona Del Mar St.</u> <u>Lakeland, FL 33809</u>	Address:	<u>334 Corona Del Mar St.</u> <u>Lakeland, FL 33809</u>
Name and Title:	<u>Melissa Morrow, Vice Chair</u>	Name and Title:	_____
Address	<u>3914 Sunset Lake Drive</u> <u>Lakeland, FL 33810</u>	Address:	_____
Name and Title:	<u>James Morrow, Treasurer</u>	Name and Title:	_____
Address	<u>3914 Sunset Lake Drive</u> <u>Lakeland, FL 33810</u>	Address:	_____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Brandon Adams
Address: 334 Corona Del Mar St.
Lakeland, FL 33809

ARTICLE VII INCORPORATOR

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

Name: Arielle Adams
Address: 334 Corona Del Mar St.
Lakeland, FL 33809

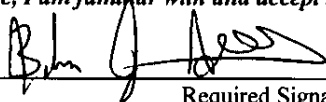
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 05/01/2016. (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

04/25/16

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

04/25/16

Date