

N 16000006373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

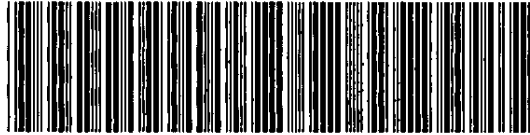
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

558-6429-



700286273737

06/08/16--01007--012 \*\*70.00

FILED  
16 JUN 23 PM 1:42  
CLERK OF COURT  
CLERK OF COURT  
CLERK OF COURT

gf 6/24/16

## COVER LETTER

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

**SUBJECT:** Escambia-Santa Rosa CTST (Community Traffic Safety Team) 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:** Zakkiyyah Q Osuigwe

\_\_\_\_\_  
Name (Printed or typed)

296 Corrydale Drive

\_\_\_\_\_  
Address

Pensacola, FL 32506

\_\_\_\_\_  
City, State & Zip

859-281-9246

\_\_\_\_\_  
Daytime Telephone number

esrctst@gmail.com

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

**NOTE: Please provide the original and one copy of the articles.**

FILED  
16 JUN 23 PM 1:42  
CLERK OF COURT  
JULIA L. BROWN  
TALLAHASSEE, FL 32314



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FILED

16 JUN 23 PM 1:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

June 14, 2016

ZAKKIYYAH Q OSUIGWE  
296 CORRYDALE DRIVE  
PENSACOLA, FL 32506

SUBJECT: ESCAMBIA-SANTA ROSA CTST (COMMUNITY TRAFFIC SAFETY  
TEAM) INC.

Ref. Number: W16000042931

We have received your document for ESCAMBIA-SANTA ROSA CTST (COMMUNITY TRAFFIC SAFETY TEAM) INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.  
<http://www.sunbiz.org/titledef.html>.

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.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 516A00012442

RECEIVED  
16 JUN 23 PM 12:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Escambia - Santa Rosa Community Traffic Safety Team Inc.

FILED

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
296 Corrydale Drive  
Pensacola, FL 32506

16 JUN 23 PM 1:42  
MAILING ADDRESS  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The Escambia - Santa Rosa Community Traffic Safety Team is a local group of highway safety advocates who are committed to solving traffic safety problems through a comprehensive multi-jurisdictional, multi-disciplinary approach which we refer to as the 4 E's in highway safety: Education/Public Information, Emergency Services, Enforcement, and Engineering.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: As stated in By-laws

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Zakkiyyah Osuigwe, President

Address: 296 Corrydale Drive  
Pensacola, FL 32506

Name and Title: Shawn Ward, Vice President

Address: 6051 Old Bagdad Hwy Suite 202  
Milton, FL 32583

Name and Title: Timothy Milstead, Secretary

Address: 6738 Dixon Street  
Milton, FL 32570

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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: Zakkiyyah Osuigwe  
Address: 296 Corrydale Drive  
Pensacola, FL 32506

FILED  
16 JUN 23 PM 1:42  
CLERK OF STATE  
TALLAHASSEE, FL 32304

**ARTICLE VII INCORPORATOR**

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

Name: Zakkiyyah Osuigwe  
Address: 296 Corrydale Drive  
Pensacola, FL 32507

**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

6-21-16

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

6-21-16

Date