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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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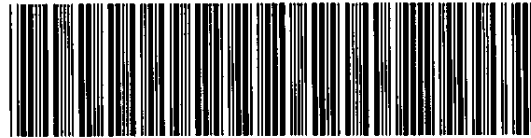
(Business Entity Name)

(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: CHOSEN FEW 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: JAMARQUIS WADDLES

Name (Printed or typed)

10852 BRANDON CHASE DR

Address

JACKSONVILLE, FL 32219

City, State & Zip

7572842278

Daytime Telephone number

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: CHÖSEN FEW INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

1829 HEART PINE DR

10852 BRANDON CHASE DR

MIDDLEBURG, FL 32068

JACKSONVILLE, FL 32219

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: In the beginning we learned to be young adults, today we assist the

less-fortunate through guidance and mentoring. Our services provide hot meals, clean clothing, toiletries, and educational supplies

for all ages.. We lead by example, set the standard, and strive for excellence. Chosen Few; many are called but only a few are chosen!

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JAMARQUIS WADDLES / PRESIDENT

Name and Title: ERNEST WESTON/ VICE PRESIDEN

Address 10852 BRANDON CHASE DR

Address: 1710 WELLS RD APT 917

JACKSONVILLE, FL 32219

ORANG PARK, FL 32073

Name and Title: LAMARIO MCGHEE / DIRECTOR

Name and Title: _____

Address 3220 HOLLYBERRY LANE

Address: _____

JACKSONVILLE, FL 32277

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: JAMARQUIS WADDLES
Address: 10852 BRANDON CHASE DR
JACKSONVILLE, FL 32219

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: JAMARQUIS WADDLES
Address: 10852 BRANDON CHASE DR
JACKSONVILLE, FL 32219

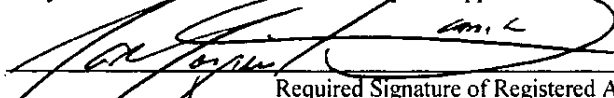
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: JUNE 17, 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

2 Aug 2016

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

2 Aug 2016

Date