

N/6000009840

(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



000290838960

10/06/16--01017--021 \*\*78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
16 OCT -6 AM 10:00

10/07/16



## COVER LETTER

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

**SUBJECT:** Enlightenment Bound, 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:** Allison Meyers

Name (Printed or typed)

1946 Temple Drive

Address

Tallahassee, FL 32303

City, State & Zip

321-262-4507

Daytime Telephone number

ameyers13086@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: Enlightenment Bound, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
1946 Temple Drive

Tallahassee, FL 32303

Mailing address, if different is:

16 OCT -6 AM 10:00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Enlightenment Bound, Inc. is a non-profit corporation and shall operate exclusively for educational and charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future Federal tax code. Enlightenment Bound, Inc. is not organized and shall not be operated for the private gain of any person. The purpose of Enlightenment Bound, Inc. is to promote success in a higher education setting by providing the free rental of required and supplemental course materials to all college students, regardless of circumstance.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: 2/3 vote

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

Name and Title: Allison Meyers

Address: 1946 Temple Drive  
Tallahassee, FL 32303

Name and Title: John Meyers

Address: 1946 Temple Drive  
Tallahassee, FL 32303

Name and Title: Joshua McCann

Address: 1946 Temple Drive  
Tallahassee, FL 32303

Name and Title: Peter Lakanen

Address: 710 N Meridian Street  
Tallahassee, FL 32303

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: Allison Meyers

Address: 1946 Temple Drive  
Tallahassee, FL 32303

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Allison Meyers

Address: 1946 Temple Drive  
Tallahassee, FL 32303

**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*

Allison Meyers

Required Signature of Registered Agent

9/26/2016

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.*

Allison Meyers

Required Signature of Incorporator

9/26/2016

Date

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
16 OCT -6 AM 10:00