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SECRETARY OF STATE
DIVISION OF CORPORATIONS

10/12/16

Carole Peeple
572 Breckenridge Vlg #101
Altamonte Spring, FL 32714
October 4, 2016

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

To whom it may Concern.

This letter is to inform you that I am not going to reinstate the Tea Time Fellowship Inc. that you administratively dissolved. I am going to start a new organization and I will use the Tea Time Fellowship Inc. name.

Sincerely,



Carole Peeple

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2016 OCT 11 PM 2:15

COVER LETTER

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

SUBJECT: Teg Time Fellowship
(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: Carole Reple
Name (Printed or typed)

572 Breckenridge VI #101
Address

Altamonte Springs FL 32714
City, State & Zip

321-277 64 66
Daytime Telephone number

tegtimefellowship@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: Ten Time Fellowship Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:

372 Breckenridge Vlg #101
Altamonte Springs FL 32714

Mailing address, if different is:

P.O. Box 162074
Altamonte Springs FL 32714

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To empower women to an expanded
quality of life

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Currently appointed
by founder.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Founder/Ex Dir.
Mrs. Carole Peeple

Address: 372 Breckenridge Vlg
#101
Altamonte Springs FL 32714

Name and Title: Diane Brown Dir.

Address: P.O. Box 682214
Orlando FL 32868

Name and Title: Sandra F. Mills Dir.

Address: 542 N. Firwood Dr
Deltona, FL 32725

Name and Title: _____

Address: _____

Name and Title: Zoretha Hopkins Dir.

Address: 3110 N.W. 165 St
Miami Gardens FL 33054

Name and Title: _____

Address: _____

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DIVISION OF CORPORATIONS
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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: Carole Peeples

Address: 572 Breckenridge Vlg #101
Altamonte Springs FL 32714

ARTICLE VII INCORPORATOR

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

Name: Carole Peeples

Address: 572 Breckenridge Vlg #101
Altamonte Springs FL 32714

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/5/16 (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

Carole Peeples

Required Signature of Registered Agent

10/5/16

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.

Carole Peeples

Required Signature of Incorporator

10/5/16

Date

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA