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COVER LETTER

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

JECT:	(PROPOSED CORP	ORATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)
osed is an original a	and one (1) copy of the Ar	ticles 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 CO	PY REQUIRED
FROM:	Ms. Cynthia Yvonne William		_
	Na 2249 Lema Drive	me (Printed or typed)	
		Address	_
	Spring Hill Fl 34609		
		City, State & Zip	-
	352-515-6613		

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

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

Daytime Telephone number

CynthiaYvonne2bad4u@yahoo.com

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

Article I NAME

BLACK History Month Productions, Inc.

Article II Principle Office:

2249 Lema Drive Spring Hill Florida 34609

Article III Purpose

The purpose for which the corporation is organized is:

To create and foster a cultural and educational awareness and appreciation of the many outstanding achievements of local "Natives of Color" who have shaped the rich and notable history of the Hernando County community. To recognize and honor other individuals of color who have distinguished themselves in all areas on the global stage.

Article IV MANNER OF ELECTION

The original officers/director are appointed by voluntary response to anonymous survey/questionnaire of service distributed to the Christian community. Further elections will observe and follow the democratic process.

Article V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Ms. Tawanna Renee Southall, Director 3018 Asbury Circle Valdosta, Georgia 31602 (229) 474-1207

Name and Title:

Ms. Nalani Madison Hasty, Director 2249 Lema Drive Spring Hill, Florida 34609 (229) 506-4152

Name and Title:

Ms. Cynthia Yvonne Williams, President/CEO/Founder 2249 Lema Drive Spring Hill Florida 34609

Article VI DISSOLUTION

DISSOLUTION

In the event of dissolution, all of the remaining assets and property of the corporation shall, after necessary expenses thereof, be distributed to such organization of like faith as shall be designated by the Board of this organization, provided the designated organization shall qualify under §501(c)(3) of the Internal Revenue Code of 1986,, as directed by a Justice of the Supreme Court of Florida.

Article VII REGISTERED AGENT:

The Name and Florida Street address of the registered agent: Ms. Cynthia Yvonne Williams 2249 Lema Drive Spring Hill Florida 34609

Article VIII INCORPORATOR

The name and address of Incorporator is: Name: Dr. Emery Ailes 14391 Spring Hill Drive Suite 118 Spring Hill Florida 34609

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.

Signature: <u>Uff Ulllicim</u>

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.

Signature: