

~~#~~ N17000010226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

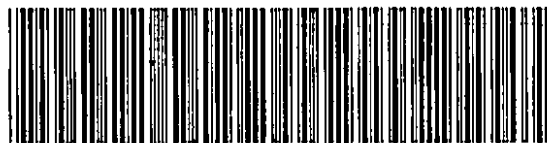
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 OCT 10 AM 10:27
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: World Foundation
Static Organization 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: Justin Wright
Name (Printed or typed)

3008 N.W. 48th ST
Address

Fort Lauderdale, FL 33309
City, State & Zip

305.992.0277
Daytime Telephone number

Jwright1991@sbcglobal.net
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: Static ~~World~~ ~~Foundation~~ Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

3008 N.W. 48th ST

Fort Lauderdale FL 33309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To develop the city with new ideas
for the residents.

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FLORENCE, FL
CLERK OF DISTRICT COURT

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: _____

The directors will be voted upon at meetings.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Justin Wright CEO Name and Title: Denise Leitch Secretary

Address: 3008 N.W. 48th ST Address: 1880 NW 59 Way
Fort Lauderdale FL Sunrise FL 33313
33309

Name and Title: Louis Embrack Treasury Name and Title: _____

Address: 925 Carolina Ave Address: _____
FL Lauderdale FL
33312

Name and Title: _____ Name and Title: _____

Address: _____ 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: Justin Wright

Address: 3008 N.W. 48th St

Fort Lauderdale FL 33309

ARTICLE VII INCORPORATOR

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

Name: Justin Wright

Address: 3008 N.W. 48th St

Fort Lauderdale FL 33309

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: OCT 5, 2017 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

Justin Wright
Required Signature of Registered Agent

9/15/17
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.

Justin Wright
Required Signature of Incorporator

9/15/17
Date

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HALL COUNTY CLERK
FLORIDA