## N17000012274

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Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314 Second Chance of Florida, Inc. SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for : \$78.75 **□**\$78.75 **\$87.50 □** \$70.00 Filing Fee Filing Fee Filing Fee & Filing Fee, & Certified Copy Certificate of Certified Copy & Certificate Status ADDITIONAL COPY REQUIRED Terry W. Williams FROM: Name (Printed or typed) **188 Martin Street** Address Quincy, Florida 32351 City, State & Zip

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

850-661-2796

wacot001@gmail.com

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

Daytime Telephone number

041106

ARTICLE II	PRINCIPAL OFFICE					
188	Principal <u>street</u> address:  Martin Street	Mailing address, if different is: P.O. BOX 187				
Qui	ncy, Florida	Quincy, Florida				
323	51	32353				
he purpose to behavioral, so	I PURPOSE  for which the corporation is organized is:  ocial, and vocational services to enable succe	onnect previously, incarce	rated individuals wil	th educations	al, citizenship	
			<u> </u>			
	<del></del>	<del></del>				
		·				
		in which the directors are	elected and appointe	d: Appointe	d as	
ndicated by t	he bylaws.  INITIAL OFFICERS AND/OR DIRECT  Terry W. Williams, Executive Director	<u>DRS</u>		d:	d as	
ndicated by t  RTICLE V  Same and Tit	he bylaws.  INITIAL OFFICERS AND/OR DIRECT  Terry W. Williams, Executive Director	ORS  Name and Title:  P.O. BO	ı G. Hughley Dir. of	d:	d as	
ndicated by t  RTICLE V  Same and Tit	he bylaws.  INITIAL OFFICERS AND/OR DIRECT  Terry W. Williams Executive Director	ORS  Name and Title: P.O. BO  Address:	ı G. Hughley Dir. of	d:	d as	
ndicated by t  RTICLE V  Same and Tit	INITIAL OFFICERS AND/OR DIRECT  Terry W. Williams Executive Director  188 Martin Street	ORS  Name and Title: P.O. BO  Address:	ı G. Hughley Dir. of DX 893	d:	d as	
ndicated by t  RTICLE V  Same and Tit  Address	Terry W. Williams Executive Director  188 Martin Street  Quincy, Florida  32351  Lotricia Walker-Williams	ORS  Name and Title:  Nakisha P.O. BO Tallahas	t G. Hughley Dir. of OX 893 ssee, Florida	Operations	d as 2017 F.C.	
RTICLE V Same and Tit Address	Terry W. Williams Executive Director  188 Martin Street  Quincy, Florida  32351  Letricia Walker-Williams  Dir of Community Affaires	Name and Title:  Name and Title:  P.O. BO  Tallahas  32302  Name and Title:	t G. Hughley Dir. of OX 893 ssee, Florida	Operations	## 2017 (CC 12 2)	
RTICLE V Same and Tit Address	the bylaws.  INITIAL OFFICERS AND/OR DIRECT  Terry W. Williams Executive Director  188 Martin Street  Quincy, Florida  32351  Letricia Walker-Williams	Name and Title:  Name and Title:  P.O. BO  Tallahas  32302  Name and Title:  Address:	t G. Hughley Dir. of DX 893 ssee, Florida	Operations	d as 2017 (157 1 2 1 2 1 2 4 3	
ARTICLE IV Indicated by to ARTICLE V Same and Tit Address Name and Tit Address	Terry W. Williams Executive Director  188 Martin Street  Quincy, Florida  32351  Letricia Walker-Williams  Dire of Commentary Affector  P.O. BOX 1261	Name and Title:    Nakisha   P.O. BO     Address:   Tallahas     32302     Name and Title:       Address:	i G. Hughley Dir. of OX 893 ssee, Florida	Operations	2017 (CC 12 12:43	

Name and Title:    Name and Title:   Name and Title:   Name and Title:   Address:	name and ritte:_		isame and title:			• • • •
Name and Title:  Address:  ARTICLE VI INCORPORATOR  The name and address of the lacopporator is:  Name:  Nakisha G. Hughley  Address:  Nackisha G. Hughley  Address:  P.O. BOX 893  Tallahassee, Florida 32302  ARTICLE VII INCORPORATOR  Tallahassee, Florida 32302  ARTICLE VII INCORPORATOR  The name and address of the lacopporator is:  Name:  Nakisha G. Hughley  Address:  P.O. BOX 893  Tallahassee, Florida 32302  ARTICLE VII INCORPORATOR  Tallahassee, Florida 32302  ARTICLE VIII INCORPORATO	Address		Address:			
Address:  Address:  Address:  Address:  Address:  ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: Terry W. WIlliams Address:  ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  Name: Nakisha G. Hughley Address: P.O. BOX 893 Tallahassee, Florida 32302  ARTICLE VIII EFFECTIVE DATE: Effective date if other than the date of filing: (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. Lam familiar with and accept the appointment as registered agent and agree to act in this capacity  Required Signature of Registered Agent  I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document only to playment of State Constitutes a third degree felony as provided for in s.817.155, F.S.	_					
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: Terry W. Williams  188 Martin Street  Quincy, Florida 32351  ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  Name: Nakisha G. Hughley  Address: P.O. BOX 893  Tallahassee, Florida 32302  ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:  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.  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    I = 1/2   1/2   1/7	Name and Title:_	<del></del>	Name and Title:			
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Terry W. WIlliams  188 Martin Street  Quincy, Florida 32351  ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  Name: Nakisha G. Hughley  Address: P.O. BOX 893  Tallahassee, Florida 32302  ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (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  Required Signature of Registered Agent  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's effective are true. I am aware that any false information submitted in a document to the Department of State's constitutes a third degree felony as provided for in s.817.155, F.S.	Address _		Address:			
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Terry W. WIlliams  188 Martin Street  Quincy, Florida 32351  ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  Name: Nakisha G. Hughley  Address: P.O. BOX 893  Tallahassee, Florida 32302  ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (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  Required Signature of Registered Agent  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's effective are true. I am aware that any false information submitted in a document to the Department of State's constitutes a third degree felony as provided for in s.817.155, F.S.	_					
Address:    188 Martin Street			table) of the registered	dagent is:		
Address:    188 Martin Street	Name:	Terry W. WIlliams				
Quincy, Florida 32351  ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Nakisha G. Hughley Address: P.O. BOX 893  Tallahassee, Florida 32302  ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: January 1, 2018  [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    12 / 12 / 17		188 Martin Street				
The name and address of the Incorporator is:  Name: Nakisha G. Hughley  Address: P.O. BOX 893  Tallahassee, Florida 32302  ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (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    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 is effective date on the Department of State's records.    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 as registered agent and agree to act in this capacity    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 as registered agent and agree to act in this capacity    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 is effective date on the Department of State for the filing.)	Addiess.	Quincy, Florida 32351				2017
Name: Address: P.O. BOX 893  Tallahassee, Florida 32302  ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:  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    I = / (2 / (7 / 12 /						12
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Effective date, if other than the date of filing:  (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    12 / 12 / 17     Required Signature of Registered Agent   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.		Tallahassee, Florida 3230	)2		·	చ్
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    12 / (2 / (7   12 / (7   12 / (7   12 / (7   12 / (17   (12 / (12 / (12	Effective date, if	other than the date of filing: January	t cannot be more th	. (OPTIONAL) an five days prior (	or 90 days after	the filing.)
Required Signature of Registered Agent  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.	Note: If the date document's effect	inserted in this block does not meet the applice date on the Department of State's recor	olicable statutory filir rds.	ig requirements, this	s date will not be	listed as the
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.						designated in this
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.		W.W		_	12/1	2/17
to the Department of State Constitutes a third degree felony as provided for in s.817.155, F.S.		Required Signature of Registered	Agent		Date	
Recorded Signature of Incorporator Date					, ,	
	1 South	Required Signature of Incorp	orator	-	Date	<u>' /                                   </u>

10/11/06