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SECRETARY OF STATE
ALLAHASSEF FLORING

OEC 12 2017

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COVER LETTER

Department of State

Division of Corporation	S		
P. O. Box 6327			
Tallahassee, FL 32314			
Emmanue SUBJECT:	el's Angels Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INCLU</u>	DE SUFFIX)
Enclosed is an original a	ind one (1) copy of the Art	icles of Incorporation and	a check for :
■ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	DPY REQUIRED
FROM:	Brynne Rorke {Yippiekiyay Nonprofit Solution: Name (Printed or typed) 6295 Greenwood Plaza Blvd. Ste 100 Address Greenwood Village, CO 80111 City, State & Zip]:
	303-747-4793		

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

Mekamoore37@gmail.com

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

Daytime Telephone number

ARTICLES OF INCORPORATION

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

ARTICLE The name o	EI NAME Emmanuel's All be:	ngels inc.			
ARTICLE	•	- 			_
	Principal <u>street</u> address: 67 Eleuthera Drive		Mailing address, if different is:		
L	ake Alfred, FL 33850				
	to the corporation is organized is: othe, and develop young orphaned	provide assis			
——————————————————————————————————————	othe, and develop young orphaned		un and other nations.		
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			0 TA		
ARTICL	Omeka Darville-Moore (P)		Melissa Kennemur (D)	_	
Name and Title:	267 Eleuthera Drive	Name and Title	267 Eleuthera Drive		
	Lake Alfred, FL 33850	Address:	Lake Alfred, FL 33850		
Name and Title	Amos Delisnor (D)		Philip Moore (D)		
	267 Eleuthera Drive	Address:	267 Eleuthera Drive		
	Lake Alfred, FL 33850	_	Lake Alfred, FL 33850		
Name and	Patrice Darville (S+)	Name and Title			
Address	267 Eleuthera Drive	Address:			
	Lake Alfred, FL 33850	_			
	·				

Name and Title	e:	Name and Title:		
Address		Address:		
Name and Title	:	Name and Title:		
Address		Address:		
			-	
<u>ARTICLE VI</u>	REGISTERED AGENT			
The name and	Florida street address (P.O. Box NOT a	ecceptable) of the registered agent	is:	
Name:	Omeka Darville-Moore			
	267 Eleuthera Drive			
Address:	Lake Alfred, FL 33850			
ARTICLE VII	INCORPORATOR address of the Incorporator is:			
Name: Address:	Omeka Darville-Moore			
	267 Eleuthera Drive			
	Lake Alfred, FL 33850			
Having been no certificate, I am	amed as registered agent to accept serv familiar with and accept the appointme	ice of process for the above stat nt as registered agent and agree	ed corporation at the place designated in o act in this capacity	this
and a	*		12/6/2017	
	Required Signature of Registe	red Agent	Date	
I submit this do to the Departme	cument and affirm that the facts stated here of State constitutes a third degree felo	nerein are true. I am aware that ony as provided for in s.817.155,	nny false information submitted in a docur F.S.	nent
and and m			12/6/2017	
	Required Signature of In	corporator	Date	

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Purpose and Dissolution Clause as required by IRS:

Purpose Clause:

"This organization is organized exclusively for charitable, educational, religious and/or scientific purposes under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, and shall not inure benefit or earnings to any private shareholder or individual.

Dissolution Clause:

"Upon the winding up and dissolution of this organization, after paying or adequately providing for the debts and obligations of the organization, the remaining assets shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, including to another tax-exempt organization under Section 501(c)(3), or shall be distributed to the federal government, or to a state or local government, for a public purpose."