

NT7000012554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

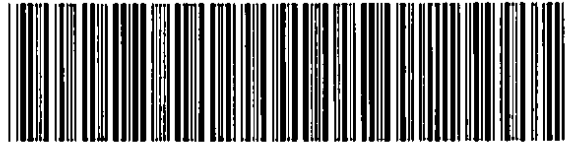
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900306826209

900306826209
12/20/17--01013--007 ♦♦87.50

2017 DEC 20 PM 1:20

FILED
2017 DEC 20 PM 1:34

COVER LETTER

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

SUBJECT: Information People Need 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: Jarvis Williams
Name (Printed or typed)

1554 Lake Ave Apt. 213
Address

Tallahassee, FL 32310
City, State & Zip

954-842-0440
Daytime Telephone number

Heavyweightz587@gmail.com
E-mail address: (to be used for future annual report notification)

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

FILED
2017 DEC 20 2:11:34
TALLAHASSEE, FL
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Information People Need Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1554 Lake Ave Apt. #213
Tallahassee, Fl. 32310

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Help people to better their lives.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Annual Meeting

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jarvis Williams C.E.O.

Name and Title: Miselle Burns C.F.O.

Address: 1554 Lake Ave Apt. #213
Tallahassee, Fl. 32310

Address: 301 S. Lipona Rd. Apt. #13
Tallahassee, Fl. 32304

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

FILED
2017 DEC 20 PM 1:34

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: Jarvis Williams

Address: 1554 Lake Ave Apt #213
Tallahassee, FL 32310

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jarvis Williams

Address: 1554 Lake Ave Apt #213
Tallahassee, FL 32310

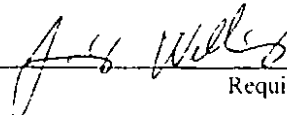
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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.)

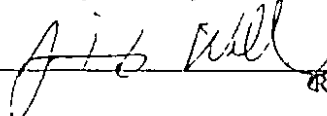
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Required Signature of Registered Agent

12-20-17
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.


Required Signature of Incorporator

12-20-17
Date

FILED
2017 DEC 20 PM 1:34
TALLAHASSEE, FLORIDA
CLERK OF THE CIRCUIT COURT