

N 18 000000 797

(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

N SAMS

JAN 24 2018



200307945472

01/22/18--01011--012 \*\*78.75

RECEIVED  
FEB 1 2018  
TALLAHASSEE, FLORIDA

18 JAN 22 PM 3:28

FILED

## COVER LETTER

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

**SUBJECT:** SHACKLES 2 SOCIETY, 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:** Royceka Hanna

\_\_\_\_\_  
Name (Printed or typed)

15701 NW 38th Court

\_\_\_\_\_  
Address

Opa-locka, FL 33054

\_\_\_\_\_  
City, State & Zip

(786) 597-4041

\_\_\_\_\_  
Daytime Telephone number

shackles2society@gmail.com

\_\_\_\_\_  
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: SHACKLES 2 SOCIETY, INC.

### ARTICLE II PRINCIPAL OFFICE

Principal street address:  
15701 NW 38th Court

Opa-Locka, FL 33054

Mailing address, if different is:

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The corporation is organized and operated exclusively for charitable, religious, educational and scientific purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code or corresponding sections of any future tax codes(s). Upon dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding sections of any future tax code(s), or shall be distributed to the Federal government, or the state or local government, for a public purpose.

### ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: As provided in the bi-laws.

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Royceka Hanna, President and Founder

Address: 15701 NW 38th Court

Opa-Locka, FL 33054

Name and Title: Carla Buggs, Secretary

Address: 3607 Bob Wallace Ave., Apt C

Huntsville, AL 35805

Name and Title: Teresa Spencer, Vice President

Address: 1015 Tweed Street

Pittsburg, PA 15204

Name and Title: Betty George, Treasurer

Address: 1313 NW 68th Terrace

Miami, FL 33147

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
JAN 22 PM 3:26  
CLERK OF DISTRICT COURT  
FLORIDA

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: Royceka Hanna

Address: 15701 NW 38th Court

Opa-Locka, FL 33054

**ARTICLE VII INCORPORATOR**

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

Name: Royceka Hanna

Address: 15701 NW 38th Court

Opa-Locka, FL 33054

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: January 15, 2018 (OPTIONAL)

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

Royceka Hanna  
Required Signature of Registered Agent

01/16/2018  
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.*

Royceka Hanna  
Required Signature of Incorporator

01/16/2018  
Date

FILED  
18 JAN 22 PM 3:39  
TALLAHASSEE, FLORIDA