| (Re                                     | equestor's Name)   |                 |  |  |
|---|--------------------|-----------------|--|--|
| (Ad                                     | ddress)            |                 |  |  |
| (Ad                                     | ddress)            |                 |  |  |
| (Ci                                     | ty/State/Zip/Phone | <del>=</del> #) |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL            |  |  |
| (Business Entity Name)                  |                    |                 |  |  |
| (Document Number)                       |                    |                 |  |  |
| Certified Copies                        | Certificates       | s of Status     |  |  |
| Special Instructions to Filing Officer: |                    |                 |  |  |
|   |                    |                 |  |  |
|   |                    |                 |  |  |
|   |                    |                 |  |  |

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# **COVER LETTER**

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

| SUBJECT: YOU HAD?         | ME AT MEOW INC                             |                                      |   |  |
|---------------------------|--|--------------------------------------|---|--|
|                           | (PROPOSED CORPO                            | RATE NAME – <u>MŪST INC</u>          | CLUDE SUFFIX)                                   |  |
| Enclosed is an original a | and one (1) copy of the Artic              | les of Incorporation and             | a check for :                                   |  |
| ■ \$70.00<br>Filing Fee   | \$78.75 Filing Fee & Certificate of Status | □\$78.75 Filing Fee & Certified Copy | S87.50 Filing Fee, Certified Copy & Certificate |  |
|                           | ,  | ADDITIONAL CO                        |   |  |
| FROM:                     | RODNEY S WHITE CPA                         |                                      | _   |  |
|                           | Name (Printed or typed)                    |                                      | -   |  |
|                           | 4650 LIPSCOMB ST NE, SUITE 20              |                                      |   |  |
| Address                   |  |                                      |   |  |
| PALM BAY, FL 32905        |  |                                      |   |  |
|                           | City. State & Zip                          |                                      |   |  |
| (321)728-9366             |  |                                      |   |  |
|                           | Daytime Telephone number                   |                                      |   |  |

RODWHITECPA@EARTHLINK.NET

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

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

# ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be **YOU HAD ME AT MEOW INC.** 

### ARTICLE II PRINCIPAL OFFICE

The principal street address of YOU HAD ME AT MEOW INC will be:

2191 LUNE COURT WEST MELBOURNE FL 32904

The mailing address of YOU HAD ME AT MEOW INC will be:

2191 LUNE COURT WEST MELBOURNE FL 32904

# ARTICLE III PURPOSE CLAUSE

Said corporation is organized exclusively for religious, charitable, educational, and related purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organization under section 501(c)(3) or the Internal Revenue Code, or the corresponding section of any future federal tax code.

## ARTICLE IV MANNER OF ELECTION

Directors shall be elected as provided for in the bylaws.

#### ARTICLE V INITIAL OFFICERS AND DIRECTORS

NAME AND TITLE: KRYSTAL ADAIR, President/Treasurer

ADDRESS: 219 LUNE COURT

WEST MELBOURNE FL 32904

NAME AND TITLE: YVETTE HARRISON, Vice President/Secretary

ADDRESS: 219 LUNE COURT

WEST MELBOURNE FL 32904

ARTICLES OF INCORPORATION OF: YOU HAD ME AT MEOW, Inc Page 1 of 3 NAME AND TITLE: TARA UNGER, Director.

ADDRESS:

219 LUNE COURT

WEST MELBOURNE FL 32904

NAME AND TITLE: BEVERLY HENDERSON, Director

ADDRESS: 219 LUNE COURT

WEST MELBOURNE FL 32904

# ARTICLE VI

No part of the net earnings of the corporation shall inure to the benefit of, or will be distributable to its members, officers, directors, trustees, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article III hereof.

No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to, any candidate for public office.

Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contribution to which are deductible under Section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

#### ARTICLE VII DISSOLUTION CLAUSE

Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes with the meaning of Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

Any such assets not so disposed of shall be disposed of by a Court of competent jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine which are organized and operated exclusively for such purposes.

# ARTICLE VIII REGISTERED AGENT

The name and Florida street address of the registered agent is:

Registered Agent Name:

Rodney S White CPA

Address:

4650 Lipscomb Street NE

Suite 20

Palm Bay, FL 32905

### ARTICLE IX INCORPORATOR

The name and address of the Incorporator is:

Name:

Rodney S White CPA

Address:

4650 Lipscomb Street NE

Suite 20

Palm Bay, FL 32905

Having been named as registered agent to accept services 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.

Rodney S White CPA, Registered Agent

Date

5/17/2018

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.

Rodney S White CPA, Incorporator

Date