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SECRETARY OF STATE TALLAHASSEE, FLORIDA

MIR HAY 21 DM I.



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 30, 2018

BEVERLY K. TAYLOR-JOHNSON 1633 SE 1ST AVE GAINESVILLE, FL 32641

SUBJECT: ELEVATIONS UNLIMITED CORPORATION

Ref. Number: W18000049029

We have received your document for ELEVATIONS UNLIMITED CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 118A00010736

District of Control of the DO DOY coope million District coope

5/28/2018 Beverly Taylor-Johnson 1633 SE 1st ave Gainesville, FL 32641

RECEIVED
2018 MAY 31 AM 10: 36

To whom it may concern,

TOTAL SMERCIAL SMERCIAL STORY OF SMERCIAL STORY

My name is Beverly Taylor-Johnson and I am the former owner of Elevations Unlimited LLC. I am writing this letter to inform you that I have dissolved and have no intentions of restarting this LLC or revoking this dissolution. I have instead formed a nonprofit in the name of Elevations Unlimited, Inc. Please be advised of these changes.

Sincerely,

Beverly Taylor-Johnson

COVER LETTER

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

SUBJECT: Elevations Unlimited Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

S70.00
Filing Fee
Filing Fee & Filing Fee
Certificate of
Status

S87.50
Filing Fee
Filing Fee
& Certified Copy
Status

Certificate

ADDITIONAL COPY REQUIRED

FROM: BOURTY H. TOUW-Johnson
Name (Printed or typed)

1033 SE ISA AVE
Address

Crincsville Fl 32641
City, State & Zip

352-379-0040

Daytime Telephone number

E-mail address: (to be used for futury 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)

The name of the corporation shall be: EVUTIONS	Unlimited Inc
ARTICLE II PRINCIPAL OFFICE	·
Principal <u>street</u> address:	Mailing address, if different is:
aginesville, El 326011	SSEE FE
,	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: This	company exists to serve
OS a resource center for	all individuals includings
individuals reantering son	iety, homeless individuals
and/or individuals requiring	assistance to become production
<u>Citizens. Clients mill receive Jo</u>	b) Shills irraining and job placement
Shelter, financial assistance of	coclassistance counseling and any
Other resources needed to reach	Identified goals.
ARTICLE IV MANNER OF ELECTION The manner in which WHO,	the directors are elected and appointed: By a majority
ARTICLE W INITIAL OFFICERS AND/OR DIRECTORS	į.
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS PYCSICLEN	+/
Name and Title: Brueny Rey IV TUNSIN (ED Name ar	nd Title: <u>Emmenuel Hooler</u>
Address 1033 SE P Ave Address	1 154
Cainesville El	1633 DE 13 Ave
32.641	Chainesville, # 32641
Name and Title: Errest W. John Son Name and	nd Title: Forde Kermi Lala Okraye
Address <u>ViCl-ProSiClint</u> Address	: Secretary
1633 SE DE AVE	1825 SE 19th drive
Carresville, Fl 32641	Grinesville, R132642
Name and Title: Floise to 16/- Name and	nd Title:
Address vddress	1633 St 1St DVe
11233 SE 15 11/2	691ncsylle 11324411
Gainsville, #1326411	

Address ARTICLE VII REGISTERED AGENT The pame and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Bellevity A. Taylor — The Sor Address: LOB Sor I Agriculture of the Incorporator is: Name: Property I L. F. I 326611 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Property A. Taylor — Sor I Agriculture of State is Island and the 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 certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity 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 of State constitutes a third degree felony as provided for in s.817.155, F.S. A 7 - / B. Required Signature of Incorporator Date	Name, and Title:	<u> </u>	Name and Title:	
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ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Bevery A. Taylor - Tomoso Address: 1853 SE 185 Are Course III Florida street address of the Incorporator is: Name: Bevery K. Taylor - Son Address: 1853 SE 185 Are Course Stille Flory Agent Son Address: 1853 SE 185 Are Course Stille Flory Agent Son Address: 1853 SE 185 Are Course Stille Flory Agent Son Address: 1853 SE 185 Are Course Stille Flory Agent Son Address: 1853 SE 185 Are Course Stille Flory Agent Son Address: 1853 SE 185 Are Course Stille Flory Agent Son Address: 1854 Service of Flory Agent Son Address: 1854 Service Agent Son 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 certificate, 1 am familiar with and accept the approintment as registered agent and agree to act in this capacity. Solve State Outperformation of State Stated herein are true, 1 am aware that any false information submitted in a docate to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.				
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