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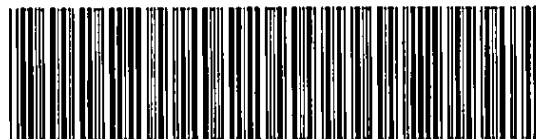
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DIVISION OF CORPORATIONS  
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## COVER LETTER

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

**SUBJECT:** R.E.I.G.N. Youth Empowerment 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:** Kahlil and Lawana Tucker  
\_\_\_\_\_  
Name (Printed or typed)  
  
714 McCormack Street  
\_\_\_\_\_  
Address  
  
Leesburg, FL 34748  
\_\_\_\_\_  
City, State & Zip  
  
352.217.8954 or 352.217.8953  
\_\_\_\_\_  
Daytime Telephone number  
  
Tucker@youngreign.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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

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**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S.. (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: R.E.I.G.N. Youth Empowerment INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
714 McCormack Street

Leesburg, FL 34748

Mailing address, if different is:  
P.O Box 1961

Minneola, FL 34755

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: R.E.I.G.N. Youth Empowerment INC. focuses on supplying integral pieces to enable the holistic building of young people from elementary school ages to college ages.

R.E.I.G.N is an acronym, of which each letter represents a faction of the company's focus. The services provided will supply the pieces needed to build a person that is well rounded and well equipped to thrive, produce, and succeed in every aspect of life.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: As stated in the By-laws

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Lawana L. Tucker, Director

Address: 714 McCormack Street  
Leesburg, FL. 34748

Name and Title: Kahlil M. Tucker, Director

Address: 714 McCormack Street  
Leesburg, FL 34748

Name and Title: Arashary K. Tucker, Officer

Address: 714 McCormack Street  
Leesburg, FL 34748

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

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

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

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

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

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

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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: Lawana L. Tucker  
Address: 714 McCormack Street  
Leesburg, FL 34748

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Lawana L. Tucker  
Address: 714 McCormack Street  
Leesburg, FL 34748

**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*

Lawana L. Tucker  
Required Signature of Registered Agent

07/16/2018  
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.*

Lawana L. Tucker  
Required Signature of Incorporator

07/16/2018  
Date