

N18000012792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

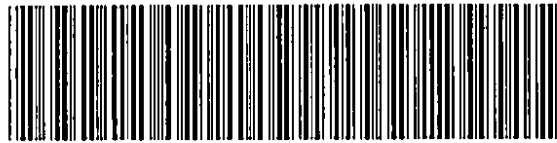
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2016 DEC -6 PM 3:14
TALLAHASSEE, FLORIDA

2018 DEC -6 PM 3:21
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

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

SUBJECT: Overcoming DA Struggle, Inc.
(PROPOSED CORPORATE NAME - ~~DO NOT~~ 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: Jacqueline Carpenter
Name (Printed or typed)

262 Sundance Drive
Address

Monticello, Florida 32344
City, State & Zip

(850) 408-5976
Daytime Telephone number

Odswithcorey@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: Overcoming DA Struggle Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

262 Sundance Drive
Monticello, FL 32344

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Our Organization provides
multiple services. Serving the community covering
the Florida area. We provide food, shelter, clothing,
counseling and find employment for the needy. We
also offer assistance with educational services.
We also assist with start of new businesses.
Housing Assistance

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: By Votes

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carey T. Cleveland / CEO Name and Title: _____

Address: 262 Sundance Drive Address: _____

Monticello, Florida
32344

Name and Title: Abigail Carpenter / Founder Name and Title: _____

Address: 262 Sundance Drive Address: _____

Monticello, FL 32344

Name and Title: Cameron Carpenter / marketing Name and Title: _____

Address: 262 Sundance Drive Address: _____

Monticello, FL 32344

SECRETARY OF STATE
ALF ARIAS JR. 910916

2010 DEC -6 PM 3:22

FILED

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: Jacqueline Carpenter

Address: 262 Sundance Drive
Monticello, Florida 32344

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2010 DEC -6 PM 3:22
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jacqueline Carpenter

Address: 262 Sundance Drive
Monticello, Florida 32344

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

Jacqueline F. Carpenter
Required Signature of Registered Agent

Dec 06, 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.

Jacqueline F. Carpenter
Required Signature of Incorporator

Dec 06, 2018
Date