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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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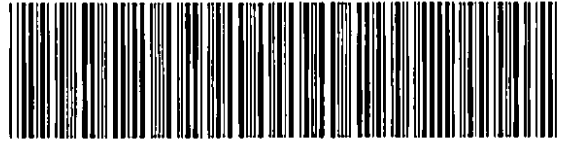
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: Victorious Warriors Cancer Support Group 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: Amon Bryant

Name (Printed or typed)

802 Shannon Street

Address

Tallahassee, FL 32305

City, State & Zip

(850) 727-9851

Daytime Telephone number

wearevictoriouswarriors@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: Victorious Warriors Cancer Support Group Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
802 Shannon Street

Tallahassee, Fl. 32305

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: This is a non-profit outreach organization aiming to reach out to members of the local community for charitable and faith based support purposes. The mission of this organization is to support people who are currently battling cancer, their family members, friends and or caretakers. We want to to celebrate life, family , knowledge, health and the pursuit of happiness through our belief in the power of fellowship and prayer.

See attached page for statement of dissolution.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

Directors will be appointed by the President of the organization.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Amon Bryant (President)

Address: 802 Shannon Street
Tallahassee, Fl. 32305

Name and Title: Reginald Walker (Treasurer)

Address: 802 Shannon Street
Tallahassee, Fl. 32305

Name and Title: Kwanzaa Walker (Vice President)

Address: 802 Shannon Street
Tallahassee, Fl. 32305

Name and Title: _____

Address: _____

Name and Title: Jeanette Lindsey (Public Relations)

Address: 2780 Wade Trail
Tallahassee, Fl. 32305

Name and Title: _____

Address: _____

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CLERK OF THE CIRCUIT COURT
TALLAHASSEE, 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: Amon Bryant
 Address: 802 Shannon Street
Tallahassee, Fl. 32305

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Amon Bryant
 Address: 802 Shannon Street
Tallahassee, Fl. 32305

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

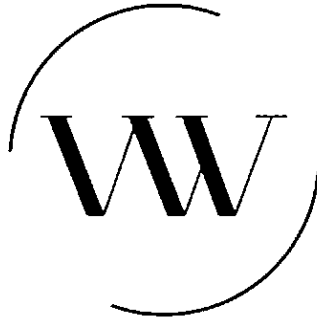
Amon Bryant
 Required Signature of Registered Agent

12-6-18
 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.

Amon Bryant
 Required Signature of Incorporator

12-6-18
 Date



VICTORIOUS WARRIORS
Cancer Support Group

Victorious Warriors Cancer Support Group
802 Shannon Street
Tallahassee, Fl. 32305

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CLERK OF COURT
TALLAHASSEE, FLORIDA

Attachment

Article III Purpose:

Statement of Dissolution:

Upon the dissolution of the organization, assets shall be distributed of one or more exempt purposes within the meaning of section 501 (C) (3) of the Internal Revenue Code, or 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 disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization 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.

This statement of dissolution is to be included as an official part of the Articles of Incorporation to ensure that the organization's assets are distributed for an exempt purpose should the organization dissolve.