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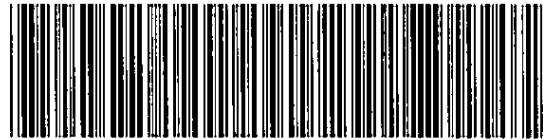
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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: THE CHOSEN ONES ACADEMY, 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: KELUNTA APOLLON
Name (Printed or typed)

2309 NW 55TH TERRACE

Address

LAUDERHILL, FL 33313

City, State & Zip

(786) 339-2332

Daytime Telephone number

thechosenonesacademy2019@yahoo.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 is: **THE CHOSEN ONES ACADEMY, INC.**

ARTICLE II – PRINCIPAL OFFICE

The principal street address: **2309 NW 55TH TERRACE**
 LAUDERHILL, FL 33313

ARTICLE III – PURPOSE

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

ARTICLE IV – MANNER OF ELECTION

The manner in which the directors are elected and appointed: A member is asked by the President to serve or they may request to be a member according to the Bylaws.

ARTICLE V – INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **KELUNTA APOLLON, PRESIDENT**
Address: **2309 NW 55TH TERRACE**
City/State/Zip: **LAUDERHILL, FL 33313**

Name and Title: **KELUNTA APOLLON, VICE PRESIDENT**
Address: **2309 NW 55TH TERRACE**
City/State/Zip: **LAUDERHILL, FL 33313**

Name and Title: **KELUNTA APOLLON, TREASURER**
Address: **2309 NW 55TH TERRACE**
City/State/Zip: **LAUDERHILL, FL 33313**

Name and Title: **KELUNTA APOLLON, SECRETARY**
Address: **2309 NW 55TH TERRACE**
City/State/Zip: **LAUDERHILL, FL 33313**

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TALLAHASSEE, FL

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ARTICLE VI – REGISTERED AGENT

The name and address of the Registered Agent is:

KELUNTA APOLLON
2309 NW 55TH TERRACE
LAUDERHILL, FL 33313

ARTICLE VII – INCORPORATOR

KELUNTA APOLLON
2309 NW 55TH TERRACE
LAUDERHILL, FL 33313

ARTICLE VIII – DISSOLUTION

The assets of the Corporation are irrevocably and permanently dedicated to purposes stipulated in the Articles of Incorporation. Upon dissolution of the organization, assets shall be distributed for 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 state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by the Court of Competent Jurisdiction 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.

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 of registered agent and agree to act in this capacity.

Kelunta Apollon
Required Signature of Registered Agent

5/29/2019
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.

Kelunta Apollon
Required Signature of Incorporator

5/29/2019
Date