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19 JUL 30 AM 8:15  
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## COVER LETTER

19 JUL 30 AM 6:05

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

SUBJECT: Teacher Give Hope 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: Yanique E. McKenzie-Samuels  
Name (Printed or typed)

204 Mesa Lane  
Address

Jacksonville, NC 28546  
City, State & Zip

910-988-6762  
Daytime Telephone number

teachersgivehopeinc@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: Teachers Give Hope Inc.

**ARTICLE II PRINCIPAL OFFICE**

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Principal street address:

Mailing address, if different is:

2060 NW 48th Terrace  
Lauderhill, FL 33313.

204 Mesa Lane  
Jacksonville, N.C  
28546

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To assist in providing  
the basic needs of children, during  
the early years, by creating a balance and  
improving their quality of life.

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

members are chosen by nomination during the  
annual meeting of the board.

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

Name and Title:	<u>Yanique Eileen McKenzie-</u> <u>Samuels (Director)</u>	Name and Title:	<u>Carol Clarke (Treasurer)</u>
Address	<u>2060 NW 48th</u> <u>Terrace, Lauderhill</u> <u>FL 33313.</u>	Address:	<u>2060 NW 48th Terrace</u> <u>Lauderhill, FL 33313.</u>

Name and Title:	<u>Marsha MA. Roberts</u> <u>(Deputy-Director)</u>	Name and Title:	<u>Gwendolyn McKenzie (Treasurer)</u>
Address	<u>204 Mesa Lane</u> <u>Jacksonville, NC</u> <u>28546.</u>	Address:	<u>836 55th St.</u> <u>Brooklyn, NY 11234</u>

Name and Title:	<u>Tamar Silvera</u> <u>Secretary</u>	Name and Title:	_____
Address	<u>216-23 115th</u> <u>Terrace, Cambria</u> <u>Heights, NY 11411</u>	Address:	_____

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

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

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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: Yanique E. McKenzie-Samuels

Address: 2060 NW 48th  
Terrace, Lauderdale, FL 33313

**ARTICLE VII INCORPORATOR**

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

Name: Yanique E. McKenzie-Samuels

Address: 2060 NW 48th Terrace,  
Lauderdale, FL 33313

**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*

Yanique E. McKenzie-Samuels

Required Signature of Registered Agent

7/21/2019  
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.*

Yanique E. McKenzie-Samuels

Required Signature of Incorporator

7/21/2019  
Date