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10/21/19--01002--001 **87.50

COVER LETTER

Department of State
Division of Corporations

PH 4: \$5

P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	PEVA TO A	NES FINDONE PRATE NAME - MUST INC	COLUDE SUFFIX)
	and one (1) copy of the Art	icles 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 CO	PY REQUIRED
FROM:	Resheka	Ford ne (Printed or typed)	_
	534 Co	llinsford ro	-
	TAllahass	ee Fla, 3)3 City, State & Zip	10
	229-25 Davi	5 - 9854	

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

Name and Title:	Name and Title:				
Address	Address:		gat of the second	—. : · :	
			•		
			igi oct 18	PH 4: 54	
Name and Title:	Name and Title:				
Address	Predicts.				
			<u></u>	_	
					
ARTICLE VI REGISTERED AGENT The name and Horida street address (P.O. Box NOT ac	contable) of the regi	stered ment is:			
Dodge Tid		over ed agent in			
	.5				
Address: 534-Collins					
Tallahasse F	a. 3230				
ARTICLE VII INCORPORATOR					
The name and address of the Incorporator is:	•				
Name: Loyal ladies F Address: 534 Colling for	myoured	Inc			
Address: 534 Willing for	ord rd				
Tallahasse Fl				,	
ARTICLE VIII EFFECTIVE DATE:					., .
Effective date, if other than the date of filing:		(OPTIONAL)	ing on OA days of	tog the filing)	
(If an effective date is listed, the date must be specific	and cannot be me	ore man five days pro	01 01 20 days at	ter the thing.)	
Note: If the date inserted in this block does not meet the	e applicable statutor	y filing requirements.	this date will not	t be listed as the	
document's effective date on the Department of State's r	records.				
Having been named as registered agent to accept serve	ice of process for t	he above stated corpo	ration at the pla	ice designated in	i this
certificate. I am familiar with and accept the appointme	nt as registered age.	nt and agree to act in	this capacity	1	
Required Signature of Registe			10(1	8/19	
' "	_		Dat	te'	
I submit this document and affirm that the facts stated i to the Department of State constitutes a third degree feld	herein are true. Lun onv ex provided for	n aware that any false in 8,817,135, F.S.	information sub	mitted in a docu	ment
1 ON Live			11/15	2/10	
Required Signature of h	ncorporator		10 / 18 Di	ate 1 - (

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

The name of the corporation shall be: Roya Ladies Empowered	$\frac{1}{2}$ $\mathcal{U}(\cdot,\cdot)$
ARTICLE II PRINCIPAL OFFICE	
Principal street address: 534 - Collins Cold 10 SA WY	
Tallahasse Fla. 32301	
	_ 6
ARTICLE III PURPOSE The purpose for which the corporation is organized is: to help the Community	001/8
in anyway necessary when in need	1. E.
ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Resh	eko Ford
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: Reshelica Ford Name and Title:	
Address 534 Callinstard Rd Address:	
Tallyhusser Fla. 32301-CEO-Viesdont	
Name and Title / / OSSING MORTIS Name and Title:	
Address 1714 1-1999 St Address:	
APT 1 32305	
Name and Title: Name and Title:	
Address 534 Calling Cord Rd Address:	
Tally house Ela.	