

N19000011097

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2018 OCT 21 AM 9:32

SECRETARY OF STATE
TALLAHASSEE, FL

FILED

OCT 8 2018

COVER LETTER

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

SUBJECT: Indigenous Empire, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Pameka L. Hunt

Name (Printed or typed)

1557 Regent Court

Address

Mount Dora, Florida 32757

City, State & Zip

(478) 304-8000 (Email) pamekacollege33@gmail.com

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 8, 2019

PAMEKA L. HUNT
1557 REGENT COURT
MOUNT DORA, FL 32757

SUBJECT: INDIGENOUS EMPIRE, INC.
Ref. Number: W19000089544

We have received your document for INDIGENOUS EMPIRE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You sent (2) different sets of Articles one for a Non Profit and one for a Profit. You cannot have a Non Profit and a Profit with the same name. Decide which one you want to file and return with a letter requesting a refund for the other. Put the name and address of person in which to mail the refund to.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist II

Letter Number: 419A00020666

Please return my refund for profit.
I sent both documents because I had to
pay for products.

(NEED
Both)

non profit

ARTICLE OF INCORPORATION
In compliance with Chapter 617, F.S. (Not For Profit)

FILED

2019 OCT 21 AM 9:32

ARTICLE I NAME

The name of the corporation shall be:

INDIGENOUS EMPIRE, INC.

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1557 REGENT COURT
MOUNT DORA, FLORIDA 32757

Mailing address, if different is:

P.O. BOX 562
MOUNT DORA, FLORIDA 32756

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation may engage in any activity or business permitted under the Native Laws, Indigenous Laws and/or etc. of the United States and of the State(s) namely but not limited to do Credit History clearing investigation, Reporting of credit profile, Counseling Service, Criminal investigations, Creative Health and Beauty Services, Creative Arts, Sells and Marketing, Businesses Networking, Agricultural Involvement, Community Gearing Training and any other activity permitted under the State.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed by considering the proper skills and ability of each candidate while providing the initial training provided by this company. Also before appointing, each candidate must undergo a proper evaluation and thorough background family research.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

PAMEKA L. HUNT, FOUNDER, 1557 REGENT COURT, MOUNT DORA, FLORIDA 32757

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

The street address of the office registered for the corporation shall be c/o Pameka L. Hunt 1557 Regent Court, Mount Dora, Florida 32757. The initial registered agent shall be Pameka L. Hunt.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Pameka L. Hunt
1557 Regent Court
Mount Dora, Florida 32757

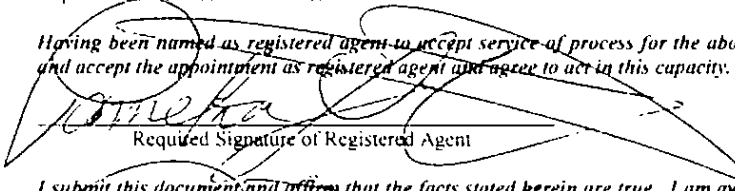
ARTICLE VIII EFFECTIVE DATE:

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.)

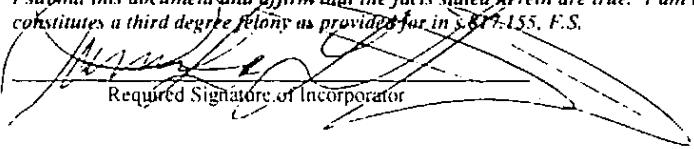
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of the State's records.

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.


Required Signature of Registered Agent

9/15/19
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 § 817.155, F.S.


Required Signature of Incorporator

9/15/19
Date