# 1200002134

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nam	e)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		;

Office Use Only

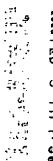
**₱£B 2 6** 2020

T. SCOTT



400340182634

02/05/20--01014--001 \*\*70.00



7020 FFR -5 PM 1:6

# ARTICLES OF INCORPORATION OF

THE SIRCLE INC.

#### A NON-PROFIT CORPORATION

#### ARTICLE I

#### NAME

1. THE NAME OF THIS CORPORATION SHALL BE: THE SIRCLE INC.

#### ARTICLE II

#### PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS FOR THIS CORPORATION SHALL BE: IN THE STATE OF FLORIDA, THE COUNTY OF MARION AND THE CITY OF OCALA. THE MAILING ADDRESS FOR THE CORPORATION IS:

6312 SE 41<sup>ST</sup> COURT OCALA, FLORIDA 34480

#### ARTICLE III

#### **PURPOSE**

- 1. WE, THE UNDERSIGNED, DESIRING TO FORM A NON-PROFIT CORPORATION TO AID IN COMMUNITY DEVELOPMENT AND AWARENESS DO HEREBY CONSTITUTE OURSELVES A VOLUNTARY NON-PROFIT CORPORATION UNDER THE NAME OF THE SIRCLE, INC. OF OCALA, FLORIDA.
- 2. OUR PRINCIPAL PURPOSE IS TO UNIFY MINORITIES OF MERION COUNTY TO INCREASE CULTURAL AWARENESS, COMMUNITY INVOLVEMENT, POLITICAL AWARENESS, VOTER PARTICIPATION AND ECONOMIC EMPOWERMENT.

#### ARTICLE IV

#### MANNER OF ELECTION

THE MANNER IN WHICH THE DIRECTORS ARE ELECTED OR APPOINTED:

- 1. APPLICATION FOR MEMBERSHIP SHALL BE BY LETTER OF INTENT SUBMITTED TO ANY EXISTING MEMBER.
- 2. RECOMMENDATIONS FOR MEMBERSHIP SHALL BE MADE BY A EXISTING MEMBER AND APPROVED BY THE MAJORITY OF THE MEMBERSHIP.
- 3. UPON ACCEPTANCE, APPLICANTS SHALL SIGN A STATEMENT AGREEING TO ABIDE BY THE ARTICLES OF INCORPORATION AND BYLAWS AS PRESENTLY OR HEREAFTER DULY ADOPTEL.

#### ARTICLE V

## INITIAL DIRECTORS/OFFICERS

NAME AND ADDRESSES:

President - Larmonica Samuel 6312 SE 41° CT. Ocala, FL 34481.

Vice President - Luzonia Waters 1367 NW 52° CT. Rd. Reddick, FL 32686

Secretary - Lipzonia Waters 1367 NW 52° CT.Rd. Reddick, FL 53686

Treasurer - Larmonica Samuel 6312 SE 415° CT. Ocala, FL 34480

#### ARTICLE VI

# INITIAL REGISTERED AGENT AND STREET ADJURESS

THE NAME AND FLORIDA STREET ADDRESS THE REGISTERED AGENT:

REGISTERED AGENT

Larmonica Samuel

6312 SE 41<sup>st</sup> CT.
Ocala, FL 34480

#### ARTICLE VII

#### **INCORPORATOR**

## THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Larmonica Samuel

6312 SE 41st CT. Ocala, FL 34480

Having been named as registered agent to accept service of process for the above stated co poration at the place designated in this certificate, I am familiar with and accept appointment as registered agent and agree to act in this capacity.