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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

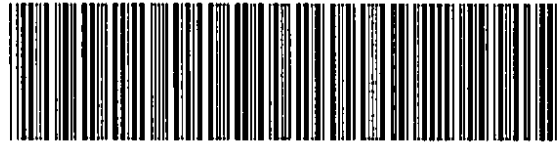
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 JUN 23 PM 12:28
FALL ARMOSEY 7834

COVER LETTER

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

SUBJECT: Because We Are A Village, 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: Ansonia Chatfield

Name (Printed or typed)

7981 S French Drive Unit 104

Address

Pembroke Pines, FL 33024

City, State & Zip

305-316-2663

Daytime Telephone number

wearethevillagefl@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: Because We Are A Village, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:

7981 S French Drive Unit 104

Pembroke Pines, FL 33024

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ansonia Chatfield, President

Address: 7981 S French Drive Unit 104
Pembroke Pines, FL 33024

Name and Title: Deborah McLeish, Vice President

Address: 7981 S French Drive Unit 104
Pembroke Pines, FL 33024

Name and Title: Katrina Sanders, Treasurer

Address: 7981 S French Drive Unit 104
Pembroke Pines, FL 33024

Name and Title: Domenike McLeish Sands, Secretary

Address: 7981 S French Drive Unit 104
Pembroke Pines, FL 33024

Name and Title: Secrekia Morgan, Board Member

Address: 7981 S French Drive Unit 104
Pembroke Pines, FL 33024

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: Ansonia Chatfield

Address: 7981 S French Drive Unit 104

Pembroke Pines, FL 33024

ARTICLE VII INCORPORATOR

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

Name: Ansonia Chatfield

Address: 7981 S French Drive Unit 104

Pembroke Pines, FL 33024

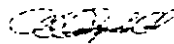
ARTICLE VIII EFFECTIVE DATE:

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



Required Signature of Registered Agent

06/17/2020

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.



Required Signature of Incorporator

06/17/2020

Date

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Address: 7981 S French Drive Unit 104
Pembroke Pines, FL 33024

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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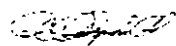
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

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