

N20000008801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

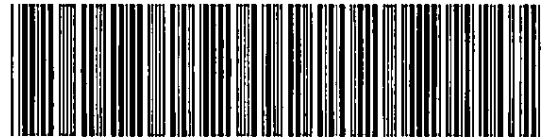
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

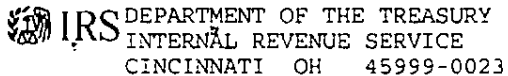
Office Use Only



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Date of this notice: 06-24-2020

Employer Identification Number:
85-1578558

Form: SS-4

Number of this notice: CP 575 E

KINZIE FOUNDATION INC
3633 E SANDPIPER DR APT 5
BOYNTON BEACH, FL 33436

For assistance you may call us at:
1-800-829-4933

Get to Derrick to file

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 85-1578558. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

When you submitted your application for an EIN, you checked the box indicating you are a non-profit organization. Assigning an EIN does not grant tax-exempt status to non-profit organizations. Publication 557, Tax-Exempt Status for Your Organization, has details on the application process, as well as information on returns you may need to file. To apply for recognition of tax-exempt status under Internal Revenue Code Section 501(c)(3), organizations must complete a Form 1023-series application for recognition. All other entities should file Form 1024 if they want to request recognition under Section 501(a).

Nearly all organizations claiming tax-exempt status must file a Form 990-series annual information return (Form 990, 990-EZ, or 990-PF) or notice (Form 990-N) beginning with the year they legally form, even if they have not yet applied for or received recognition of tax-exempt status.

Unless a filing exception applies to you (search www.irs.gov for Annual Exempt Organization Return: Who Must File), you will lose your tax-exempt status if you fail to file a required return or notice for three consecutive years. We start calculating this three-year period from the tax year we assigned the EIN to you. If that first tax year isn't a full twelve months, you're still responsible for submitting a return for that year. If you didn't legally form in the same tax year in which you obtained your EIN, contact us at the phone number or address listed at the top of this letter.

For the most current information on your filing requirements and other important information, visit www.irs.gov/charities.

COVER LETTER

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

SUBJECT: THE KINZIE FOUNDATION 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: WILNESHIA KINZIE
Name (Printed or typed)

3633 EAST SANDPIPER DR APT 5
Address

BOYNTON BEACH, FL 33436
City, State & Zip

561-777-9143
Daytime Telephone number

WILNESHIAKINZIE@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: THE KINZIE FOUNDATION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
3633 EAST SANDPIPER DR

APT 5

BOYNTON BEACH, FL 33436

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SEE ATTACHMENT

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: WILNESHIA KINZIE - PRESIDENT

Address: 3633 EAST SANDPIPER DR

APT 5

BOYNTON BEACH, FL 33436

Name and Title: JOANN JONES - TREASURER

Address: 3633 EAST SANDPIPER DR

APT 5

BOYNTON BEACH, FL 33436

Name and Title: REGINALD BURGESS - SECRETARY

Address: 3633 EAST SANDPIPER DR

APT 5

BOYNTON BEACH, FL 33436

Name and Title: _____

Address: _____

Name and Title: ASHLEY JONES - DIRECTOR

Address: 3633 EAST SANDPIPER DR

APT 5

BOYNTON BEACH, FL 33436

Name and Title: _____

Address: _____

Name and Title:

Name and Title:

Address:

Address:

0

Name and Title:

Name and Title:

Address:

Address:

0

ARTICLE VI. REGISTERED AGENT

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

Name: WILNESHIA KINZIE

Address: 3633 EAST SANDPIPER DR UNIT 5

BOYNTON BEACH, FL 33436

ARTICLE VII. INCORPORATOR

The name and address of the Incorporator is:

Name: WILNESHIA KINZIE

Address: 3633 EAST SANDPIPER DR UNIT 5

BOYNTON BEACH, FL 33436

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

08/04/20

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

08/04/20

Date