

121000004712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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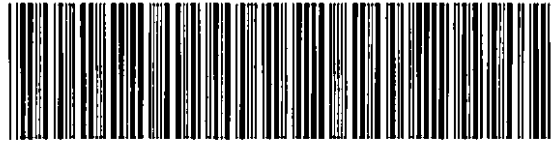
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Handwritten signature and date: 4-20-21

COVER LETTER

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

SUBJECT: North District Richard Allen Young Adult Council, 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

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FROM: Trina Forbes
Name (Printed or typed)

1105 Greanpine Blvd H3
Address

West Palm Beach FL 33409
City, State & Zip

(561) 236-1507
Daytime Telephone number

NDRAYAC@yahoo.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: North District Richard Allen Young Adult Council, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

1105 Greenpine Blvd H3

West Palm Beach FL 33409

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Church Ministry to Serve
in Coordinating Young Adults in the local Church

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

Elected at the Annual Meeting

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Forbes, Trina ; President Name and Title: _____

Address 1105 Greenpine Blvd H3 Address: _____
West Palm Beach FL
33409

Name and Title: Lee, Shawn ; Treasurer Name and Title: _____

Address 3500 Avenue K Address: _____
Fort Pierce FL 34947

Name and Title: McNeely Jr, Larryton ; Secretary Name and Title: _____

Address 207 Essex Drive Address: _____
Fort Pierce, FL 34946

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ED

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: Trina Forbes

Address: 1105 Greenpine Blvd H3
West Palm Beach FL 33409

ARTICLE VII INCORPORATOR

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

Name: Trina Forbes

Address: 1105 Greenpine Blvd H3
West Palm Beach FL 33409

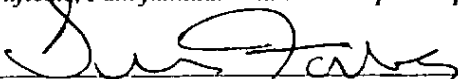
ARTICLE VIII EFFECTIVE DATE:

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.)

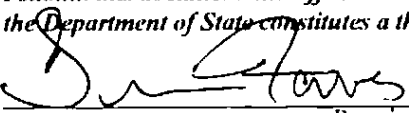
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

3/12/21
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

3/12/21
Date

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