

NZ1000005582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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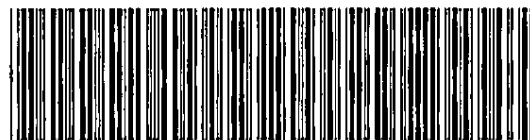
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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T. BURCH

MAY 11 2021

COVER LETTER

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

SUBJECT: DREAMS WORK 239, 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: JACQUELINE D. GARY

Name (Printed or typed)

591 GENEVIERE DRIVE

Address

LEHIGH ACRES, FL 33936

City, State & Zip

239-245-1419

Daytime Telephone number

DREAMWORKS239@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 DREAMS WORKS 239, INC.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address:
591 GENEVIERE DRIVE

Mailing address, if different is: _____

LEHIGH ACRES, FL 33936

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To help build and empower the youth in our community by forming collaborations with local businesses in the Dunbar community and providing the youth with mentoring and community

resources that will help them to overcome social and economical barriers and to cultivate personal growth and

development, character and leadership skills. Dreams Works 239, Inc. is organized exclusively for charitable,

educational and literacy purposes for the making of distributions to organizations that qualify as exempt organizations

under section 501 (c) (3) or the Internal Revenue Code, or the corresponding section of any future federal tax code.

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

Founder, Jacqueline Gary will appoint the initial Directors. Subsequence Directors will be nominated and elected by a majority vote of the initial appointed directors.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jacqueline D. Gary/CEO

Name and Title: Angela McClary/SEC

Address 591 Genevieve Drive
Lehigh Acres, Fl 33936

Address: 1926 Venice Avenue North
Leigh Acres, FL 33971

Name and Title: Stephen W. Moore/CFO

Name and Title: _____

Address 591 Genevieve Drive
Lehigh Acres, FL 33936

Address: _____

Name and Title: _____ Name and Title: _____

Address _____ 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: Jacqueline D. Gary

Address: 591 Genevieve Drive
Lehigh acres, FL 33936

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jacqueline D. Gary

Address: 591 Genevieve Drive
Lehigh Acres, FL 33936

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 03/16/2021 (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

Jacqueline D. Gary
Required Signature of Registered Agent

03/16/2021
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.

Jacqueline D. Gary
Required Signature of Incorporator

03/16/2021
Date

SECRET
TALLAHASSEE, FLORIDA

2021 MAR 19 PM 3:11

DB