SSSJOOONS

| (Req | uestor's Name) | |
|----------------------------|------------------|-------------|
| (Addi | ress) | |
| (Adda | ress) | |
| (City/ | /State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busi | iness Entity Nar | me) |
| (Doc | ument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Fi | lling Officer: | |
| | | |
| | | |
| | | |
| | | |

Office Use Only

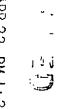
J. FASON MAY 25 2021



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04/22/21--01012--001 **78.75

2021 APR 22 PH 4: 35



COVER LETTER

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

| | (PROPOSED CORPO | ORATE NAME – <u>MUST IN</u> | CLUDE SUFFIX) |
|--------------------------|--|--------------------------------------|--|
| nclosed is an original a | and one (1) copy of the Art | icles 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 CO | PPY REQUIRED |
| FROM: | Desirae Gillyard | | _ |
| | Nat | | |
| | 3003 Sam Hicks Road | | |
| | | Address | - |
| | Plant City, FL 33567 | | |
| | | City, State & Zip | - |
| | 95A 6A2 9795 | | |

desiraegillyard@gmail.com

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

Daytime Telephone number

ARTICLES OF INCORPORATION In compliance with Chapter 617, F.S., (Not for Profit)

| <u>ARTICLE I</u> | I PRINCIPAL OFFICE | | | |
|--|--|--|---|---------------------|
| 300 | Principał <u>street</u> address: 03 Sam Hicks Road | | Mailing address, if different is: | |
| Pla | nt City, Fl 33567 | | | |
| ARTICLE I The purpose to increase t | II PURPOSE for which the corporation is organized is: the circulation of the Black and Brown dollar | o empower and edu | cate small business owners of color in | Plant City; |
| while encou | raging success and increasing business traffi | ic. | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | V MANNED OF ELECTION The man | nar in which the dir | ey a si | mple majority |
| . <u>4RTICLE I</u> | V MANNER OF ELECTION The man | ner in which the dir | ectors are elected and appointed: | mple majority |
| | | | ectors are elected and appointed: by a single- | mple majority |
| ARTICLE V | / INITIAL OFFICERS AND/OR DIRECT | TORS | Victoria Saunders, Roard Member | mple majority |
| ARTICLE V | / INITIAL OFFICERS AND/OR DIRECT | TORS Name and Title | Victoria Saunders, Roard Member | mple majority |
| ARTICLE V | / INITIAL OFFICERS AND/OR DIRECT INITIAL OFFICERS AND/OR DIRECT INITIAL OFFICERS AND/OR DIRECTOR INITIAL OFFICERS AND | TORS | Victoria Saunders, Board Member | - |
| ARTICLE V Name and T Address | itle: Desirac Gillyard, Executive Director 3003 Sam Hicks Road Plant City, FL 33567 | TORS Name and Title Address: | Victoria Saunders, Board Member 808 Risk Street Plant City, FL 33563 | 2021 |
| Name and T Address | itle: Desirac Gillyard, Executive Director 3003 Sam Hicks Road Plant City, FL 33567 | TORS Name and Title Address: Name and Title | Victoria Saunders, Board Member 808 Risk Street Plant City, FL 33563 Byron Reynolds, Board Member | . 1 1 20 |
| Name and T Address | itle: Claudia Rocha, Board Member | TORS Name and Title Address: | Victoria Saunders, Board Member 808 Risk Street Plant City, FL 33563 | 2021 APR 22 PM |
| Name and T Address | itle: Desirac Gillyard, Executive Director 3003 Sam Hicks Road Plant City, FL 33567 Claudia Rocha, Board Member 3904 Creek Woods Drive Plant City, FL 33563 | TORS Name and Title Address: Name and Title | Victoria Saunders, Board Member 808 Risk Street Plant City, FL 33563 Byron Reynolds, Board Member 428 NE 1st Ave | 2021 APR 22 |
| ARTICLE V Name and T Address Name and T | itle: Desirac Gillyard, Executive Director 3003 Sam Hicks Road Plant City, FL 33567 Claudia Rocha, Board Member 3904 Creek Woods Drive Plant City, FL 33563 | TORS Name and Title Address: Name and Title | Victoria Saunders, Board Member 808 Risk Street Plant City, FL 33563 Byron Reynolds, Board Member 428 NE 1st Ave Pompano Beach, FL 33060 | 2021 APR 22 PM 4: 3 |
| ARTICLE I ARTICLE V Name and T Address Name and T Address | itle: Desirac Gillyard, Executive Director 3003 Sam Hicks Road Plant City, FL 33567 Claudia Rocha, Board Member 3904 Creek Woods Drive Plant City, FL 33563 | TORS Name and Title Address: Name and Title Address: Address: | Victoria Saunders, Board Member 808 Risk Street Plant City, FL 33563 Byron Reynolds, Board Member 428 NE 1st Ave Pompano Beach, FL 33060 | 2021 APR 22 PM 4: 3 |

| Name and Title | : | Name and Title: | | _ | |
|--|--|--|-------------------------------------|--------------|-----------|
| Address | | | | _ | |
| | | | | _ | |
| Name and Title | · | Name and Title: | · | - | |
| Address | | Address: | | _ | |
| | | | | - | |
| ARTICLE VI The name and | REGISTERED AGENT Florida street address (P.O. Box NOT ac | | | - | |
| Name: | Desirae Gillyard | | | | |
| Address: | 3003 Sam Hicks Road | | | | |
| Plant City, Fl 33567 | Plant City, Fl 33567 | | | 2021 APR | |
| | | | | APR | |
| The name and a | INCORPORATOR address of the Incorporator is: | | | 22 | |
| Name: | Desirae Gillyard | | | PH | ٤ |
| Address: 3003 Sam Hicks Road | | . ; | | الله : | |
| | Plant City, Fl 33567 | | • | \tilde{S} | |
| Effective date, i | EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific | . (OPTIC | ONAL; days prior or 90 days afte | er the fili: | ng.) |
| Note: If the da document's effe | te inserted in this block does not meet the ective date on the Department of State's i | e applicable statutory filing requirecords. | rements, this date will not t | oc listed a | is the |
| Having been no certificate, I am | amed as registered agent to accept servi familiar with and accept the appointmen | ce of process for the above state at as registered agent and agree to | act in this capacity | designat | ed in thi |
| Required Signature of Registered Agent | | | 04/17/2021 | | - |
| l submit this do | DeSIVAL GillyArd cument and affirm that the facts stated he of State constitutes a third degree felony | rein are true. I am aware that any | Date s false information submitte | ed in a do | cument t |
| 100 | * BOO | | 04/17/2021 | | |
| -/W | Required Signature of Inc | corporator | Date | | - |
| Dt. | sirae Gillyard | | | | |