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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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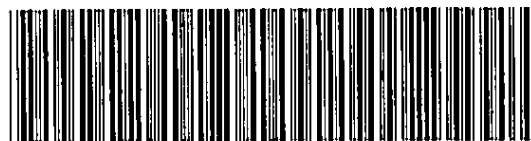
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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## COVER LETTER

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

**SUBJECT:** Dress for Success Emerald Coast Florida, 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:** Dr. Beatrice Gail Shorter-Judson  
\_\_\_\_\_  
Name (Printed or typed)  
  
214 Indigo Loop  
\_\_\_\_\_  
Address  
  
Miramar Beach, FL 32550  
\_\_\_\_\_  
City, State & Zip  
  
850-586-0667  
\_\_\_\_\_  
Daytime Telephone number  
  
Beatricejudson@yahoo.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

FILED  
MAY 12 PM 1:08  
2008

**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: Dress for Success Emerald Coast Florida, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
214 Indigo Loop

Miramar Beach, Florida

32550

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To engage, empower, and support women desirous of  
economic freedom by connecting them with resources essential to achieve professional and career success  
on the Emerald Coast of Florida.

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

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Dr. B. Gail Shorter-Judson, Exec Director

Address: 214 Indigo Loop

Miramar Beach, FL

32550

Name and Title: Jessica G. Judson, Grant-Writer

Address: 1041 Farragut Street

New Orleans

LA 70114

Name and Title: Horace A. Judson, Treasurer

Address: 214 Indigo Loop

Miramar Beach, FL

32550

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

2021 MAY 12 PM 12:03

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
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**ARTICLE VI REGISTERED AGENT**

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

Name: Horace A. Judson  
Address: 214 Indigo Loop  
Miramar Beach, FL 32550

**ARTICLE VII INCORPORATOR**

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

Name: Dr. B. Gail Shorter-Judson  
Address: 214 Indigo Loop  
Miramar Beach, FL 32550

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 05/15/2021. (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*

Horace A. Judson  
Required Signature of Registered Agent

05/15/2021  
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.*

B. Gail Shorter-Judson  
Required Signature of Incorporator

05/15/2021  
Date