# N2100008227

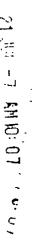
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(City/State/Zip/Phone #)
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# COVER LETTER

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

losed is an original and o	one (1) copy of the Ar	ticles 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	PY REQUIRED

17350 STATE HWY 249 #220

HOUSTON, TX 77064

888-462-3453

EFILE1234@INCFILE.COM
E-mail address: (to be used for future annual report notification)

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

Address

City, State & Zip

Daytime Telephone number

ARTICLE I NAME

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				WEOHH INC
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TICLEIL			
HCLL, II	PRINCIPAL OFFICE		
	Principal street address:		Mailing address, if different is:
7958	AUSTIN RD	79	958 AUSTIN RD,
JACK	SONVILLE, FLORIDA 32244	J <i>.</i>	ACKSONVILLE, FLORIDA 32244
DUV	AL .	DI	UVAL
TICLE III	<u>PURPOSE</u>		
: purpose fo	r which the corporation is organized is	:	
control or g	ain influence of the imagery and mes	ssage presented by re	ap music too our communities.
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TICLE IV	MANNER OF ELECTION The m	nanner in which the dir	rectors are elected and appointed: BY LA
TICLE IV	MANNER OF ELECTION The m	nanner in which the dir	rectors are elected and appointed: BY LA
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	MANNER OF ELECTION The m		rectors are elected and appointed: BY LA
			rectors are elected and appointed: BY LA
TICLE V_	INITIAL OFFICERS AND/OR DIR	PECTORS	
TICLE V	INITIAL OFFICERS AND/OR DIR Timothy Wright (DIRECTOR)	EECTORS  Name and Titl	e: Shandra Coley Wright (DIRECTOR)
TICLE V	INITIAL OFFICERS AND/OR DIR Timothy Wright (DIRECTOR) 7958 Austin Rd,	PECTORS	e: Shandra Coley Wright (DIRECTOR) 7958 Austin Rd,
TICLE V	INITIAL OFFICERS AND/OR DIR Timothy Wright (DIRECTOR)	EECTORS  Name and Titl	e: Shandra Coley Wright (DIRECTOR)
_	INITIAL OFFICERS AND/OR DIR Timothy Wright (DIRECTOR) 7958 Austin Rd,	EECTORS  Name and Titl Address:	e: Shandra Coley Wright (DIRECTOR) 7958 Austin Rd,
TICLE V me and Title dress	INITIAL OFFICERS AND/OR DIR Timothy Wright (DIRECTOR)  7958 Austin Rd,  Jacksonville FL 32244	EECTORS  Name and Titl  Address:	e: Shandra Coley Wright (DIRECTOR) 7958 Austin Rd, Jacksonville FL 32244
me and Title dress	INITIAL OFFICERS AND/OR DIR Timothy Wright (DIRECTOR) 7958 Austin Rd, Jacksonville FL 32244 Shania Sapp (DIRECTOR)	Name and Titl Address: Name and Titl	e: Shandra Coley Wright (DIRECTOR)  7958 Austin Rd,  Jacksonville FL 32244
me and Title dress	INITIAL OFFICERS AND/OR DIR Timothy Wright (DIRECTOR)  7958 Austin Rd,  Jacksonville FL 32244  Shania Sapp (DIRECTOR)  7958 Austin Rd,	Name and Titl Address: Name and Titl	e: Shandra Coley Wright (DIRECTOR) 7958 Austin Rd, Jacksonville FL 32244
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Name and Title	e:	Name and Title:	
Address			
Name and Title	::	Name and Title:	<del></del>
Address		Address:	
	<u>,</u>		
		<del></del>	
ARTICLE VI	REGISTERED AGENT		
	Florida street address (P.O. Box NOT ac	ceptable) of the registered :	agent is:
Name:	TIMOTHY WRIGHT	<u> </u>	
Address:	7958 AUSTIN RD		
	JACKSONVILLE 32244		
	INCORPORATOR address of the Incorporator is:		
Name:	LOVETTE DOBSON		
Address:	17350 STATE HWY 249 #220	<del></del>	
	HOUSTON, TX 77064		
<u>ARTICLE VIII</u>	EFFECTIVE DATE:		
	if other than the date of filing:  date is listed, the date must be specific		OPTIONAL)  Tive days prior or 90 days after the filing.)
	te inserted in this block does not meet the ective date on the Department of State's re		requirements, this date will not be listed as the
	familiar with and accept the appointmen	it as registered agent and a	e stated corporation at the place designated in the gree to act in this capacity
	Required Signature of Register	Wight	06/29/2021
	Required Signature of Register	ed Agent	Date
	cument and affirm that the facts stated he ent of State constitutes a third degree felor	erein are true. I am aware	that any false information submitted in a docume 155, F.S.
	Lovette Dobson		06/29/2021
	Required Signature of Inc	corporator	Date

### 501c3 language

Said corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in these articles.

No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

## **COVER LETTER**

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

SUBJECT: WEOHH INC	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
nclosed is an original a	nd one (1) copy of the At	ticles 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	PY REQUIRED		
FROM: _	LOVETTE DOBSON	me (Printed or typed)	_		

Daytime Telephone number

EFILE1234@INCFILE.COM

17350 STATE HWY 249 #220

HOUSTON, TX 77064

888-462-3453

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

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

Address

City, State & Zip

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

ARTICLE I The name of	NAME the corporation shall be: WEOHH INC.		4-
<u>ARTICLE I</u>			
	Principal street address:		Mailing address, if different is:
79	58 AUSTIN RD		7958 AUSTIN RD,
JA	CKSONVILLE, FLORIDA 32244		JACKSONVILLE, FLORIDA 32244
DU	JVAL		DUVAL
• •	II PURPOSE  for which the corporation is organized is or gain influence of the imagery and me		
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- <del></del>			
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	INITIAL OFFICERS AND/OR DIN		tłc: Shandra Coley Wright (DIRECTOR)
Address		Address:	7958 Austin Rd,
ruaress	Jacksonville FL 32244		Jacksonville FL 32244
√ame and Ti	ile: Shania Sapp (DIRECTOR)	Name and Ti	tle:
Address	7958 Austin Rd,	Address:	
	Jacksonville FL 32244	<u>.</u>	
			<u> </u>
lame and Tit			
Address		Name and Ti	
Address	le:	Name and Ti	tle:

Name and Title:_	·	Name and Title:	
Address _		Address:	
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_		~ <del>-</del>	
Name and Title:_		Name and Title:	<del></del>
Address _		Address:	<del></del>
_			
_			
	REGISTERED AGENT orida street address (P.O. Box NOT accep	table) of the registered agent is:	
Name:	TIMOTHY WRIGHT		
Address:	7958 AUSTIN RD		
	JACKSONVILLE 32244		
	INCORPORATOR dress of the Incorporator is:		
Name:	LOVETTE DOBSON		
Address:	17350 STATE HWY 249 #220		
	HOUSTON, TX 77064		
ARTICLE VIII  Effective date, if o	EFFECTIVE DATE: ther than the date of filing:	(OPTIONAL	)
If an effective da	te is listed, the date must be specific and	cannot be more than five days p.	
	nserted in this block does not meet the app we date on the Department of State's recor		s, this date will not be listed as the
	ed as registered agent to accept service of miliar with and accept the appointment as	registered agent and agree to act in	
	Required Signature of Registered A	ight	06/29/2021
	Required Signature of Registered	ng chit	Date
	nent and affirm that the facts stated herein of State constitutes a third degree felony as		e information submitted in a document
	Lovette Dobson		06/29/2021
<del></del>	Required Signature of Incorpo	prator	Date

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