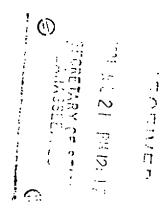
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SECULTATION STATE

## **COVER LETTER**

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

NPP-USA IN	IC. TALLAHASSEE-FLORIE	DA CHAPTER		
JJEC1	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)			
losed is an original a	and one (1) copy of the Ar	ticles of Incorporation and	a check for:	
T 670 00	□ e20.25	□¢70.75	= 607.60	
□ \$70.00	□ \$78.75	□\$78.75	<b>■</b> \$87.50	
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,	
	Certificate of	& Certified Copy	Certified Copy	
	Status		& Certificate	
		ADDITIONAL COPY REQUIRED		
		<u></u>		
FROM:	SHANI ABUBAKARI			
rkow:	Na	me (Printed or typed)	=	

Address

TALLAHASSEE, FL 32304

City, State & Zip

850-300-8184

Daytime Telephone number

ABUBAKARI.SHANI@YAHOO.COM

1819 W PENSACOLA ST APT D10

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)

•		• • •	,
•	•	!	

The name of the corporation shall be: \_\_\_\_\_\_NPP-USA INC. TALLAHASSEE-FLORIDA CHAPTER 2721 JUL 21 PH 12: 26 SECRETAL OF STATI ARTICLE II PRINCIPAL OFFICE Principal street address: 1819 W PENSACOLA ST APT D10 TALLAHASSEE, FL 32304 The purpose for which the corporation is organized is: TO MOBILIZE GHANAIAN RESIDENTS IN THE TALLAHASSEE AND ITS ENVIRONS FOR ACTION IN DEEPENING DEMOCRATIC GROWTH IN GHANA. ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

BY VOTING ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: SHANI ABUBAKARI - CHAIRMAN Name and Title: BRIDGET AIKENS - SECRETARY

Address	1819 W PENSACOLA ST APT D10	Address:	3390 SW 173RD WAY APT 1A
	TALLAHASSEE, FL 32304		MIAMI FL 33029
Name and Title	HARUNA MOHAMMED - VICE CHAIR	Name and Title	NANNETTE NOSH - ORGANIZER
Address	1320 LEVY AVE	Address:	1320 LEVY AVE
	TALLAHASSEE, FL 32310	,	TALLAHASSEE FL 32310
Name and Title	WILLIAMS TUFFOUR - TREASURER	Name and Title	ERIC KUWORNU - PRO
Address	1320 LEVY AVE	Address:	501 ZELL DRIVE AP,T C7
	TALLAHASSEE, FL 32310	,	ORLANDO, FL

Name and Title	.: <u>N/A</u>	Name and Title	: <u>N/A</u>			
Address				<del></del> -		
•		-				
Name and Title		- Nome and Title	N/A			
Name and Thie			•			
Address		_ Address:		<del>.</del>		
		-				
ADTICL DAG	DECISTEDED ACCENT			Ş	<u> </u>	
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acce	ptable) of the regi	stered agent is:	<u> </u>	=======================================	
Name:	SHANI ABUBAKARI		•	وغ مصر مارون	اني- احد	•
Address:	1819 W PENSACOLA ST APT D10			i -		 ; 1
	TALLAHASSEE, FL 32304				PH 12: 20	ار ا
APTICI E VII	<u>INCORPORATOR</u>			J. ATE	26	
	address of the Incorporator is:					
Name:	SHANI ABUBAKARI	·				
Address:	1819 W PENSACOLA ST APT D10					
	TALLAHASSEE, FL 32304					
	I EFFECTIVE DATE: if other than the date of filing:		(OPTIONAL)			
	date is listed, the date must be specific a	nd cannot be mo		r 90 days after the	e filing.)	)
	te inserted in this block does not meet the a ective date on the Department of State's rec		y filing requirements, this	date will not be lis	ited as th	ıc
	amed as registered agent to accept service familiar with and accept the appointment a				ignated	in this
- · · · · ·	- Xil	· · · · · ·	-	7/20/2021		
	Required Signature of Registered	l Agent		Date		
	cument and affirm that the facts stated here t of State constitutes a third degree felony as			nation submitted in	a docun	nent to
•		- <b>*</b>		7/20/2021		

Date

Required Signature of Incorporator