

142/0000/2070

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

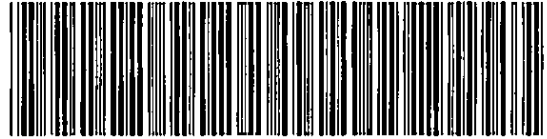
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

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COVER LETTER

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

SUBJECT: THE LYFE PROJECT 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: ERNESTO DEPEYSTER

Name (Printed or typed)

539 16TH ST APT. 7

Address

MIAMI BEACH, FL 33139

City, State & Zip

347-589-7670

Daytime Telephone number

LYFEPROJECTINC@GMAIL.COM

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

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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: THE LYFE PROJECT INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
8941 IZALEA CIRCLE

MIRAMAR, FL 33025

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: 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 corresponding section of any future federal tax code without limitation of the foregoing.

The purpose of The LYFE Project Inc. is to cultivate a culture of Mental, Interpersonal and Financial Success in communities,
with a primary focus on our underserved populations by offering educational tools, exposure experiences, and tangible resources to
to both develop and redefine Success.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ernesto Depeyster, Pres

Address: 539 16th St.
Apt. 7

Miami Beach, FL 33139

Name and Title: Patti Depeyster, Sec.

Address: 22 North Parkwood Drive
Savannah, GA 31404

Name and Title: Esther Jeanbart, V.P

Address: 539 16th ST
Apt. 7

Miami Beach, FL 33139

Name and Title: Danny Hines, Treas.

Address: 539 16th St
Apt. 7

Miami Beach, FL 33139

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FL

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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: Ernesto Depeyster
 Address: 539 16th ST Apt. 7
 Miami Beach, FL 33139

ARTICLE VII INCORPORATOR

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

Name: Ernesto Depeyster
 Address: 539 16th ST Apt. 7
 Miami Beach, FL 33139

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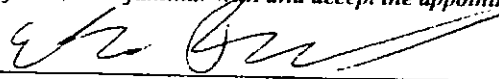
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 09/27/2021 (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.)

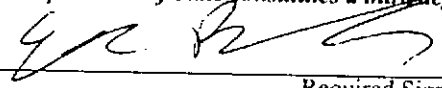
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


 Required Signature of Registered Agent

9/27/21
 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.


 Required Signature of Incorporator

9/27/21
 Date

Article IX: Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or shall be distributed to the federal government, or to a state or local government, for public purpose. Any such assets not disposed of shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the organization 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 purpose

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