

N21000012179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

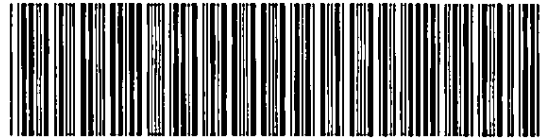
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DIVISION OF CORPORATIONS
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: National Society for Performance Improvement, 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: Gabriela Ford, EdD
Name (Printed or typed)

541 Cheyenne Ave
Address

Melbourne
City, State & Zip

(321)989 4629
Daytime Telephone number

fordsigningservices@gmail.com
E-mail address: (to be used for future annual report notification)

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

2021 SEP 14 AM 1:35
SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

Principal street address:

541 Cheyenne Ave

Melbourne, FL 32935

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: We are a non-profit, members-based educational organization, that believes

"Human Performance Improvement Matters." We help people, especially minority groups to make a difference in their lives.

the lives of their families, their communities and the world. By providing education, practical tools, and proven strategies for

achieving personal and professional goals towards becoming small business owners. We help members create a bigger impact,

as they become greater contributors to society. Our interventions are based on evidence and research an the aid of donations, grants

and volunteer contributions. We promote our members to become accountable toward achieving sustainable business return on

investment and measurable results. We facilitate networking opportunities and a mindset of respect, tolerance and inclusion.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gabriela Ford, EdD PRESIDENT

Address: 541 Cheyenne Av

Melbourne, FL 32935

Name and Title: Gilberto Padua, Vice-President of

Address: Communication

194 Turtle Place

Rockledge, FL 32955

Name and Title: Tom Ford, Director of Membership

Address: 340 Ford Trail

Mountain Home, AR 72653

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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TALLAHASSEE
SEP 14 2021

2021 SEP 14 AM 1:35

FILED

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: Gabriela Ford, EdD
Address: 541 Cheyenne AV
Melbourne, FL 32935

ARTICLE VII INCORPORATOR

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

Name: Gabriela Ford, EdD
Address: 541 Cheyenne AV
Melbourne, FL 32935

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

Gabriela Ford GABRIELA FORD
Required Signature of Registered Agent

9/27/2021
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.

Gabriela Ford GABRIELA FORD
Required Signature of Incorporator

9/27/2021
Date

SECRETARY OF STATE
TALLAHASSEE, FL

2021 SEP 14 AM 1:35

FILED

September 27, 2021

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Attn: Karen Lovelace
Regulatory Specialist II

Subject: NATIONAL SOCIETY FOR PERFORMANCE IMPROVEMENT, INC.
Ref. number W21000127156
Letter Number 121 A00022794

Please find attached original and copy of articles of incorporation for the Nonprofit
NATIONAL SOCIETY FOR PERFORMANCE IMPROVEMENT, INC. with the requested correction.
I appreciate your intervention to complete the filling of the articles of incorporation.

Best regards,

Gabriela Ford, EdD
(321) 989 4629

FILED
2021 SEP 14 AM 1:35
SECRETARY OF STATE
TALLAHASSEE, FL