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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

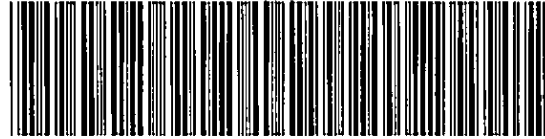
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T. SCOTT,

JUN 27 2022



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CASE AND/OR VIDEO
FRANCHISING
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2022 JUN 24 AM 9:10

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 29, 2022

THERESA H. THOMAS
316 DANIELS ST.
HASTINGS, FL 32145

SUBJECT: WOMEN'S COTERIE COMMUNITY CLUB, INC.
Ref. Number: W21000137837

We have received your document for WOMEN'S COTERIE COMMUNITY CLUB, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 322A00007263

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

ARTICLE I NAME

The name of the corporation shall be: The Women's Coterie Community Club/Hastings Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

211 Chase St
Hastings FL 32145

Mailing address, if different is:

P.O. Box 903
Hastings, FL 32145

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: provide community outreach goods + services.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: As stated in the bylaws, elected.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rosa Tolbert

Address: _____

Name and Title: President

Address: _____

Name and Title: Scarlet Carter

Address: _____

Name and Title: Secretary

Address: _____

Name and Title: Tanya Jackson

Address: _____

Name and Title: Treasurer / ~~editting~~

Address: _____

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FRANCHISING
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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: Theresa H. Thomas

Address: 316 Daniels St.
Hastings, FL 32145

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Christopher T Coleman

Address: 308 North Main Street
Hastings, Florida 32145

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

Theresa H. Thomas
Required Signature of Registered Agent

May 4 2022
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.

Ch Coleman
Required Signature of Incorporator

May 4, 2022
Date