

NA23000003292

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

NA23000038470

Office Use Only



700405346807

03/14/23--01009--005 **87.00

Handwritten signature and date 3/14/23

FILED
2023 MAR 14 AM 2:29
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: Mother of Zion 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: Paris Calhoun
Name (Printed or typed)
378 NorthLake Blvd, #232
Address
North Palm Beach, FL 33408
City, State & Zip
561-252-7191
Daytime Telephone number
pariscalhoun1@gmail.com
E-mail address: (to be used for future annual report notification)

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

SECRETARY OF STATE
TALLAHASSEE, FL

2023 MAR 14 AM 2:29

FILED

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

ARTICLE I NAME

The name of the corporation shall be: Mother of Zion Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
378 NorthLake Blvd, #232

North Palm Beach, FL 33408

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Mother of Zion will provide domestic abuse & violence services, empowerment resources and programs to assist victims and
families with tools needed to rebuild and transform lives.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Paris Calhoun (President) Name and Title: _____

Address: 378 NorthLake Blvd, #232 Address: _____
North Palm Beac, FL 33408

Name and Title: Cathleen Allen (V President) Name and Title: _____

Address: 378 NorthLake Blvd, #232 Address: _____
North Palm Beac, FL 33408

Name and Title: Toni Baxter (Secretary) Name and Title: _____

Address: 378 NorthLake Blvd, #232 Address: _____
North Palm Beac, FL 33408

SECRETARY OF STATE
TALLAHASSEE, FL

2023 MAR 14 AM 2:29

FILED

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: Paris Calhoun

Address: 378 NorthLake Blvd, #232

North Palm Beach, FL 33408

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Paris Calhoun

Address: 378 NorthLake Blvd, #232

North Palm Beach, FL 33408

FILED
2023 MAR 14 AM 2:29
SECRETARY OF STATE
TALLAHASSEE, FL


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



Required Signature of Registered Agent

03/10/2023

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

03/10/2023

Date

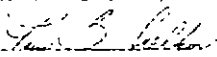
Empowerment Resources

Mother of Zion
561-662-9187
pariscalhoun1@gmail.com

03/22/2023

I Paris Calhoun have no intensions of reinstating Mother of Zion LLC. I would like to release the name to W23000038470: **Name:** Mother of Zion Inc. **Address:** 378, NorthLake Blvd, # 232, North Palm Beach, FL 33408, **Phone:** 561-252-7191

Thank you,



Paris Calhoun

FILED
2023 MAR 14 AM 2:29
SECRETARY OF STATE
TALLAHASSEE, FL