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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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April 26, 2023

To Whom It May Concern:

My name is Tiffany Bellizan-Mickens. I am the owner of The Neighborhood Village, LLC. I am writing this letter to release the name so that it can be used for the nonprofit organization. The application is attached.

Thank you,

Tiffany Bellizan-Mickens

Williamy Releigan-Mickey

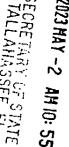
COVER LETTER

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

-	rhood Village, Inc.		
BJECT:	(PROPOSED CORPO	DRATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)
doead is an anisimal s	and one (1) come of the Arti	alog of Invormanation and	o about for
tosed is all original a	and one (1) copy of the Arti	icles of incorporation and	a check for:
\$70.00	□ \$78.75	□\$78.75	□ \$87.50
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,
	Certificate of	& Certified Copy	
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		ADDITIONAL CO	DV DEALHDEN
		ADDITIONAL CO	PY KEQUIKED
	Tiffany Bellizan-Mickens		
FROM:			
	Nan	ne (Printed or typed)	_
	564 SW 13th Street		
		Address	_
	Belle Glade, Florida 33430		
		City, State & Zip	_
	(985) 259 - 1369	,	
	Daytir	ne Telephone number	_
	tiffany@theneighborhoodvilla	-	

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

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







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

ARTICLE I The name of the	NAME The Neighborhood he corporation shall be:	Village, Inc.				
	PRINCIPAL OFFICE					
564	Principal <u>street</u> address: SW 13th Street	Mailing address, if different is:				
Bello	e Glade, Florida 33430			· · · · · · · · · · · · · · · · · · ·		
ARTICLE III. The purpose I	I PURPOSE for which the corporation is organized is:	to be a school and	community outre	ach center.		
	/ MANNER OF ELECTION The man		ectors are elected	and appointed:	at the arinual i	meeting
Name and Tit	Bellizan-Mickens, Tiffany, N Title: CEO	Name and Title		Title: Director		
Address	564 SW 13th Street	Address:	10374 Alder Cro			
	Belle Glade, FL 33430	-	Jacksonville, FL	.32222	_	
Name and Tit	Humphrey, Lakeitra, N Title: Director	— Name and Title	Pitts, Adrienne	Title: Director		
Address	714B 6th Street SW	Address:			202 SE	
Birmingham, AL 35211	Birmingham, AL 35211		Bradenton, FL 3	4203	2023 MAY -	7
Name and Tit	ile:	Name and Title	: <u></u>	ASSEE	-2 AM 10:	m
Address		Address:		FL.		O
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	· ————————————————————————————————————			-		•

Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	
_			
_			-
_			
	REGISTERED AGENT		
The name and F	lorida street address (P.O. Box NOT acce Tiffany Bellizan-Mickens	ptable) of the registered agent is:	
Name:			o ~
Address:	564 SW 13th Street	TA A	023
ridaress.	Belle Glade, FL 33430		F 1
			2 % —
ARTICLE VII	INCORPORATOR		
The name and a	ddress of the Incorporator is:	<u> </u>	
Name:	Tiffany Bellizan-Mickens		55 55
A 14	564 SW 13th Street	,	8
Address:	Belle Glade, FL 33430		
ARTICLE VIII	EFFECTIVE DATE:		
Effective date, if	other than the date of filing:	. (OPTIONAL)	
(If an effective o	late is listed, the date must be specific a	nd cannot be more than five days prior or 90 days a	ifter the filing.)
	e inserted in this block does not meet the active date on the Department of State's rec	pplicable statutory filing requirements, this date will neords.	ot be listed as the
Having been na	med as registered agent to accept service	of process for the above stated corporation at the pla	ace designated in this
certificate, I am j	familiar with and accept the appointment a	is registered agent and agree to act in this capacity	1
Villa.	11 ROSCILLI - MICK	cm 4/24	2/2023
1000	W Required Signature of Registered	l Agent Da	te
I submit this doc		in are true. I am aware that any false information subm	ultted in a document to
γ.		·	12 22
Lixians	Required Signature of Incor	4/20	<u> / んぴつ</u>
	reduited Signature of Incol	iporator Di	aic .







INSTRUCTIONS FOR NOT FOR PROFIT ARTICLES OF INCORPORATION

The following are instructions, a cover letter and sample articles of incorporation pursuant to Chapter 617, Florida Statutes (F.S.)

NOTE: THIS IS A BASIC FORM MEETING MINIMAL REQUIREMENTS FOR FILING ARTICLES OF INCORPORATION.

The Division of Corporations strongly recommends that corporate documents be reviewed by your legal counsel. The Division is a filing agency and as such does not render any legal, accounting, or tax advice.

If you intend to apply for IRS federal tax exemption as a charitable organization, your articles of incorporation must contain a required purposed clause and a dissolution of assets provision. Valuable information on 501 (c) (3) qualification is on the IRS website, www.irs.gov. It includes sample articles of incorporation. Click the "charities and Nonprofits" link and then the <u>Life Cycle of a Public Charity</u> link.

Chapter 496, F.S., requires charitable organizations or sponsors intending to solicit contributions from the public in the state of Florida to register annually with the Division of Consumer Services. They may be reached at (850) 488-2221 or 1-800-435-7352 for more information.

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your corporate name selection.

Pursuant to Chapter 617.0202, F.S., the articles of incorporation must set forth the following:

Article I: The name of the corporation **must** include a corporate suffix such as Corporation,

Corp., Incorporated, or Inc.; "Company" or "Co." may not be used as a corporate

suffix by a nonprofit corporation.

Article II: The principal place of business and mailing address of the corporation. The principal address

must be a street address. The mailing address, if different, can be a P.O. Box address.

CR2E006 (09/16)

Article III: The specific purpose or purposes for which the corporation is organized. A general

statement of "any and all lawful business" will not be sufficient.

Article IV: The manner in which the Directors are elected or appointed.

Article V: The names, address and titles of the Directors/Officers (optional) When naming Directors, 3

must be listed. The names of officers/directors may be required to apply for a license, open a

bank account, etc.

Article VI: The name and Florida street address (P.O. Box NOT acceptable) of the initial

Registered Agent. The Registered Agent <u>must</u> sign in the space provided and type or print his/her name below signature accepting the designation as Registered Agent.

Article VII: The name and address of the Incorporator. The Incorporator <u>must</u> sign in the space

provided and type or print his/her name below signature.

The "incorporator" is the person who prepares and signs the Articles of Incorporation and then submits them for filing to the Division of Corporations. The function of the incorporator usually

ends after the corporation is filed.

An Effective Date: Add a separate article if applicable or necessary: An effective date may be

added to the Articles of Incorporation, otherwise the date of receipt will be the file date. (An effective date can not be more than five (5) days prior to

the date of receipt or ninety (90) days after the date of filing).

Important Information About the Requirement to File an Annual Report

All Florida Not- For-Profit Corporations must file an Annual Report yearly to maintain "active" status. The first report is due in the year <u>following</u> formation. The report must be filed electronically online between January 1st and May 1st. The fee for the annual report is \$61.25. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1st, go to our website at <u>www.sunbiz.org</u>.

The fee for filing a not for profit corporation is:

Filing Fee \$35.00 Designation of Registered Agent \$35.00

Certified Copy (optional) \$8.75 (plus \$1 per page for each page over 8, not to exceed a

maximum of \$52.50).

Certificate of Status (optional) \$8.75

(Make checks payable to Department of State)

Mailing Address:
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
(850) 245-6052

Street Address:
Department of State
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303
(850) 245-6052