

N2300009575

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000275058 3))



H230002750583ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : REGISTERED AGENTS INC.
Account Number : 120090000081
Phone : (307)200-2803
Fax Number : (813)436-5206

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED
2023 AUG -8 PM 1:55
CORPORATIONS

FLORIDA PROFIT/NON PROFIT CORPORATION

Lejeune Empowered Advocacy for Widows Inc

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

2023 AUG -8 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FL
FILED

Electronic Filing Menu

Corporate Filing Menu

Help

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

ARTICLE I NAME

The name of the corporation shall be: Lejeune Empowered Advocacy for Widows Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:
7901 4th St N

Mailing address, if different is:
4464 Ellipse Drive

STE 300

Jacksonville Florida 32246

St. Petersburg FL 33702

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of the organization includes, but is not limited to: offering emotional support to widows whose husbands were poisoned and killed by the toxic water at Camp Lejeune, providing assistance with filing DIC claims and offering any additional support required when dealing with the Veterans Affairs Agency, offering emotional support throughout the legal process of lawsuits, extending financial aid to those in need, and conducting outreach initiatives aimed at raising awareness and fundraising efforts.

ARTICLE IV MANNER OF ELECTION

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

ARTICLE V INTIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michelle James, DP

Name and Title: Kimberly Jensen, DT

Address: 7901 4th St N STE 300
St. Petersburg, FL 33702

Address: 7901 4th St N STE 300
St. Petersburg, FL 33702

Name and Title: Karen Swindler, DS

Name and Title:

Address: 7901 4th St N STE 300
St. Petersburg, FL 33702

Address:

Name and Title:

Name and Title:

Address:

Address:

FILED
2023 AUG -0 AM 9:06
STATE OF FLORIDA
COUNTY OF ST. PETERSBURG

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: Northwest Registered Agent LLC
Address: 7901 4th St N STE 300
St. Petersburg FL 33702

2023 AUG -8 AM 9:06
DEPARTMENT OF STATE
TALLAHASSEE, FL

FILED

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nat Smith
Address: 7901 4th St N STE 300
St. Petersburg FL 33702

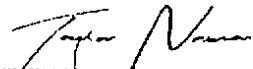
ARTICLE VIII EFFECTIVE DATE:

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

 _____ 08/08/2023
Required Signature of Registered Agent 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.

 _____ 08/08/2023
Required Signature of Incorporator Date