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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

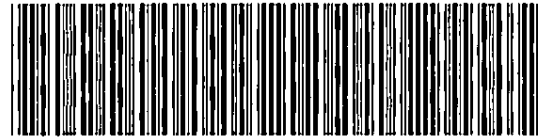
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CORPORATIONS
TALLAHASSEE, FLORIDA

2024

FEB 12:57

COVER LETTER

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

SUBJECT: True Destiny Chapter No. 84, 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: Teresa Womble
Name (Printed or typed)

8817 N. Pembroke Court
Address

Tallahassee FL 32311
City, State & Zip

(850) 728-1525
Daytime Telephone number

truedestiny84jgc@gmail.com
E-mail address: (to be used for future annual report notification)

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

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

ARTICLE I NAME

The name of the corporation shall be: True Destiny Chapter No. 84, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

8817 N. Pembroke Court
Tallahassee, FL 32311

Mailing address, if different is:

P.O. Box 7505
Tallahassee, FL 32314

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: striving for Order of the Eastern Star
excellency through education, training, dedication, and
commitment. To extend peace, harmony, unity, insight,
and love to those seeking a more extended diffusion
of the principles of morality & friendship.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Annual Election

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Teresa Womble, PRES.

Address: 8817 N. Pembroke Ct.
Tallahassee, FL 32311

Name and Title: Jamilyn Pettway, V. Pres.

Address: 145 Duane Drive
Crawfordville, FL 32327

Name and Title: Vanessa Wade, Sec.

Address: 4420 Westover Dr.
Tallahassee, FL 32303

Name and Title: Cindy Jackson-Wayman, Tres.

Address: 1252 Dicus Lane
Tallahassee, FL 32305

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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: Teresa Womble

Address: 8817 N. Pembroke Ct.

Tallahassee, FL 32311

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Teresa Womble

Address: 8817 N. Pembroke Ct.

Tallahassee, FL 32311

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: Jan 22, 2024 (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

Teresa Womble
Required Signature of Registered Agent

1/22/2024
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.

Teresa Womble
Required Signature of Incorporator

1/22/2024
Date

2024 ... 2 ... 12:58