

N24000010997

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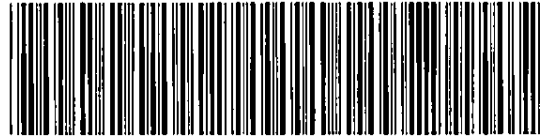
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2024 AUG 20 PM 5:16  
SECRETARY OF STATE  
TALLAHASSEE, FL

W24000051847



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 1, 2024

SHANARA HAWKINGS  
77117 MERLOT SIENNA AVE  
GIBSONTON, FL 33534 US

SUBJECT: DYSLEXIA FOR PAULL INC.  
Ref. Number: W24000051847

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the **complete document**, including the electronic filing cover sheet.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return 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.

Tabitha J Howell  
Regulatory Specialist II

Letter Number: 424A00006940

## COVER LETTER

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

**SUBJECT:** Dyslexia for PAULL 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:** Shanara Hollins Hawkins  
\_\_\_\_\_  
Name (Printed or typed)

7117 Merlot Sienna Ave.  
\_\_\_\_\_  
Address

Gibson, Florida 33534  
\_\_\_\_\_  
City, State & Zip

214-448-3333  
\_\_\_\_\_  
Daytime Telephone number

shanara.hawkins@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)

**FILED**  
**2024 AUG 26 PM 5:16**  
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TALLAHASSEE, FL

**ARTICLE I NAME**

The name of the corporation shall be: Dyslexia for PAULL Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal Street Address:

Mailing address, if different:

7117 Merlot Sienna Ave.  
Gibsonton, Florida 33534

**ARTICLE III PURPOSE**

This corporation is organized to provide evidence-based literacy instruction in underserved communities, to individuals with dyslexia and related disorders.

The purpose for which this corporation is organized is exclusively charitable, literary, and educational within the meaning of Section 501 (c) (3) of the Internal Revenue Code of 1986 or the corresponding provisions of any future Internal Revenue Service laws.

No substantial part of the activities of this corporation shall consist of the carrying on of propaganda or otherwise attempting to influence legislation, nor shall this corporation participate in or intervene in (including the publishing or distributing of statements) any political campaign on behalf of (or in opposition to) any candidate for public office.

In the event of the dissolution, the residual assets of the organization will be turned over to one or more organizations which themselves are exempt as organizations described in section 501 (c) (3) of the Internal Revenue Code of 1986 or corresponding sections of any prior or future Internal Revenue code or to the federal, state or local government for exclusive public purposes.

**ARTICLE**

**IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: \_\_\_\_\_

by majority vote.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box **NOT** acceptable) of the registered agent is:

Name: Shanara Hawkins

Address: 77117 Merlot Sienna Ave.

Gibsonton, FL 33534

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Shanara Hawkins

Address: 77117 Merlot Sienna Ave.

Gibsonton, FL 33534

**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*

Shanara Hawkins

Required Signature of Registered Agent

8-13-24

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.*

Shanara Hawkins

Required Signature of Incorporator

8-13-24

Date

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