

PI0000102013

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

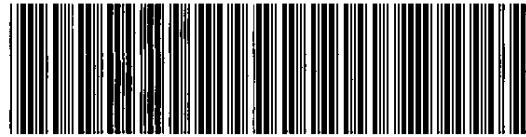
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

*Subsidiary
RA - inactive*

Office Use Only



500187270455

11/08/10--01006--014 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 DEC 17 P 12:12

FILED

COVER LETTER

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

SUBJECT: **SECOND HAND ONE CHANCE CORPORATION**
(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: **Yamuley Cazeau**
Name (Printed or typed)

4086 Luzon Avenue
Address

Lake Worth, FL 33461
City, State & Zip

561-641-8355
4086 Luzon Avenue Telephone number

ycazeau@hotmail.com ✓
E-mail address: (to be used for future annual report notification)

2010 DEC 17 P 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
10 DEC 17 PM 1:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 10, 2010

YAMULEY CAZEAU
4086 LUZON AVENUE
LAKE WORTH, FL 33461

SUBJECT: SECOND HAND ONE CHANCE
Ref. Number: W10000052739

We have received your document for SECOND HAND ONE CHANCE and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

The Registered Agent that you have listed is not an active corporation in our office. They were administratively dissolved on Sept. 24, 2010.

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) 245-6913.

Diane Cushing
Regulatory Specialist II Supervisor

Letter Number: 410A00026496

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

ARTICLE I NAME

The name of the corporation shall be:

SECOND HAND ONE CHANCE CORPORATION

FILED

ARTICLE II PRINCIPAL OFFICE

Principal street address
4086 Luzon Avenue
Lake Worth, FL 33461

Mailing address, if different is:
PO BOX 5623
Lake Worth, FL 33466
2010 DEC 17 P 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To aide and assist young single mothers with the essentials needed for job searching, education, and employment. (ei. professional business attire, resume writing...)

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

Biannual Voting

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Yamuley Cazeau- President
Address: 4086 Luzon Avenue
Lake Worth, FL 33461

Name and Title: Yamuley Cazeau- Secretary
Address: 4086 Luzon Avenue
Lake Worth, FL 33461

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
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:

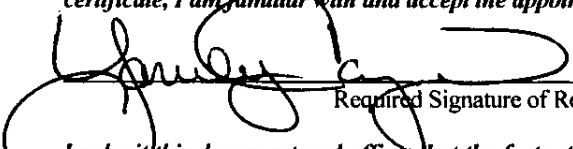
Name: Yamuley Cazeau
Address: 4086 Luzon Avenue
Lake Worth, FL 33461

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Yamuley Cazeau
Address: PO BOX 5623
Lake Worth, FL 33466

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

12/10/10
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

12/10/10
Date