

P11000027312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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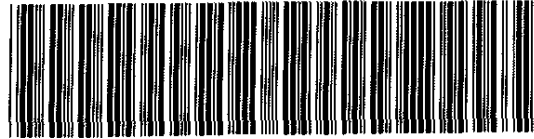
(Business Entity Name)

(Document Number)

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11 MAR 18 PM 3:37

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

11 MAR 18 PM 4:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

56 3/18/11

COVER LETTER

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

SUBJECT: Humble Praise Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Humble Praise Inc.
Name (Printed or typed)

514 Long Pine Drive
Address

Tallahassee, Fla 32305
City, State & Zip

(850) 591-6699
Daytime Telephone number

Mthorpe@FSU.edu
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAR 18 PM 4:32

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Humble Praise Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

514 Long Pine Drive
Tallahassee, Fla 32305

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Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Conduct and do business in the state of Florida

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michelle F. Thorpe
Address: 514 Long Pine Drive
Tallahassee, Fla
32305

Name and Title: Craphonso J. Thorpe
Address: 514 Long Pine Drive
Tallahassee, Fla
32305

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: Michelle F. Thorpe
Address: 514 Long Pine Drive
Tallahassee, Fl 32305

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Michelle F. Thorpe
Address: 514 Long Pine Drive
Tallahassee, Fl 32305

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

Michelle F. Thorpe
Required Signature/Registered Agent

03/18/2011
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Michelle F. Thorpe
Required Signature/Incorporator

03/18/2011
Date