

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
 Division of Corporations
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From:
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
ANALIE JOHNSON, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

*Please file
 on the effective
 date 7/18/16*

16 JUL 18 PM 5:08
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Corporate Filing Menu

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COVER LETTER

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

SUBJECT: Analie Johnson, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Nicole Dandridge, Esq. Tools for Change
Name (Printed or typed)

180 NW 62nd Street
Address

Miami, Florida 33150
City, State & Zip

305-401-7638
Daytime Telephone number

nicole@tfc-miami.org
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 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Analie Johnson, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

8124 NW 10th Street

Mailing address, if different is:

Plantation, Florida 33322

same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any lawful purpose.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Analie Johnson, President

Name and Title: _____

Address 8124 NW 10th Street

Address: _____

Plantation, Florida 33322

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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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: Analie Johnson
Address: 8124 NW 10th Street
Plantation, Florida 33322

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Analie Johnson
Address: 8124 NW 10th Street
Plantation, Florida 33322

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 07/18/2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business 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



Required Signature/Registered Agent

07/18/2016
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.



Required Signature/Incorporator

07/18/2016
Date

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