

P17000096324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

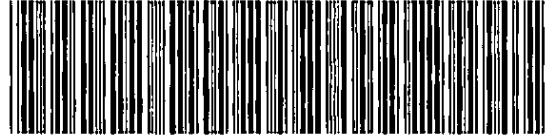
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2017 DEC -4 PM 4:35  
FILING OFFICE  
TALLAHASSEE, FL

DEC 04 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 16, 2017

AYESHA CHIDOLUE  
1540 INTERNATIONAL PKWY STE 2000  
LAKE MARY, FL 32746 US

SUBJECT: JOY, INC  
Ref. Number: W17000091595

We have received your document for JOY, INC 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 designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L07000012223.

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.

Carlos E Rico  
Regulatory Specialist II

Letter Number: 117A00023263

**FLORIDA PROFIT BENEFIT CORPORATION**

**COVER LETTER**

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

Joy Incredible, Inc.

**SUBJECT:** \_\_\_\_\_  
(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

☒ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

Ayesha Chidolue  
FROM: \_\_\_\_\_  
Name (Printed or typed)  
1540 International Pkwy, Suite 2000  
\_\_\_\_\_  
Address  
Lake Mary, FL 32746  
\_\_\_\_\_  
City, State & Zip  
407-995-6567  
\_\_\_\_\_  
Daytime Telephone number  
ayesha@chidoluelaw.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

2017 DEC -4 PM 4:33

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

**ARTICLES OF INCORPORATION FOR FLORIDA PROFIT BENEFIT CORPORATION**

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

**ARTICLE I NAME**

Joy Incredible, Inc.

The name of the benefit corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is: \_\_\_\_\_

1044 Chapel Street, Unit 208, New Haven, CT 06510

**ARTICLE III BENEFIT STATEMENT AND BUSINESS PURPOSE**

The corporation elects to be a benefit corporation in accordance with s. 607.603, F.S.

The purpose for which the corporation is organized is to create a general public benefit and:

mainstream research and science on happiness and positive psychology through media and teaching

products, integrating them with faith traditions to help people, especially the youth in finding joy

in their lives, their work and in transforming their communities.

The general and/or specific public benefit(s) to be created by the corporation (in addition to its general purpose) is/are as follows (optional):

**ARTICLE IV SHARES**

1,000,000

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS, DIRECTORS, BENEFIT DIRECTOR AND BENEFIT OFFICER (if Applicable)**

Name and Title: Chude Jideonwo, CEO & President

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

Address: 1044 Chapel Street, Unit 208, New Haven, CT 06510

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

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

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

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

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

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

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

If applicable, BENEFIT DIRECTOR:

If applicable, BENEFIT OFFICER:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

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

**ARTICLE VI REGISTERED AGENT**

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

Ayesha Chidolue

Name: \_\_\_\_\_

1540 International Pkwy, Suite 2000

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

Lake Mary, FL 32746

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Ayesha Chidolue

Name: \_\_\_\_\_

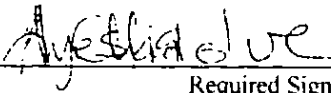
1540 International Pkwy, Suite 2000

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

Lake Mary, FL 32746

**ARTICLE VIII ADDITIONAL QUALIFICATIONS OF BENEFIT DIRECTOR, IF ANY:**

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

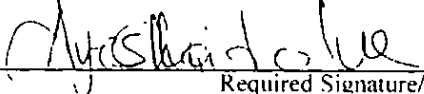


Required Signature/Registered Agent

11/27/17

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

11/27/17

Date

2017 DEC -4 PM 4:33  
F. S. D. C.

## **Articles of Incorporation for Joy, Inc. Addendum**

**Effective Date for Joy, Inc. 1/1/2018 (January 1<sup>st</sup>, 2018).**