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FLORIDA PROFIT BENEFIT CORPORATION

COVER LETTER

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

TradeRoots Co.

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
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: Gabriel A Garrett

Name (Printed or typed)

221 N F Street

Address

Pensacola, Florida, 32502

City, State & Zip

6314783793

Daytime Telephone number

ggaabe@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 FOR FLORIDA PROFIT BENEFIT CORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the benefit corporation shall be: TradeRoots Co.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

221 N F Street

Pensacola, Florida, 32502

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:

To preserve, conserve, and restore the natural environment.

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):

To conserve and restore rainforests of the world.

To make it easier for consumers to make ecologically beneficial choices.

To educate the public and businesses on how to operate in a more ecologically beneficial manner.

ARTICLE IV SHARES

100,000

The number of shares of stock is:

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

Name and Title: Garrett, Gabriel, A. COO

Name and Title: Turner, Hilary, A. CEO

Address: 221 N. F Street

Address: 221 N. F Street

Pensacola, Florida

Pensacola, Florida

32502

32502

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

If applicable, BENEFIT DIRECTOR:

Name : Turner, Hilary, A.

Address 221 N. F Street

Pensacola, Florida

32502

If applicable, BENEFIT OFFICER:

Name: Garrett, Gabriel, A.

Address: 221 N. F Street

Pensacola, Florida

32502

ARTICLE VI REGISTERED AGENT

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

Name: Gabriel A. Garrett

Address: 221 N. F Street

Pensacola, Florida, 32502

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Gabriel A. Garrett

Address: 221 N. F Street

Pensacola, Florida, 32502

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

Gabriel Garrett

12/17/2018

Required Signature/Registered Agent

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.

Gabriel Garrett

12/17/2018

Required Signature/Incorporator

Date

ARTICLE A

Additional Qualifications:

Effective Date: January 1st, 2019