

P22000055545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

(Document Number)

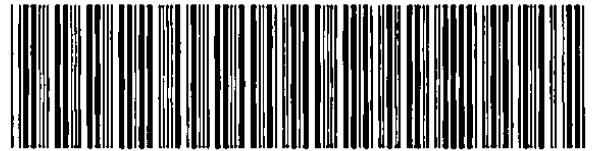
Certified Copies

Certificates of Status

Special Instructions to Filing Officer:

\$ 87.50

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07/11/22--01001--012 **122.1

07/19/22--01003--001 **17.5

ALLAHASSEE, FL

2022 JUL 12 PM 4:57

FILED
2022 JUL 12 PM 3:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM THE ACCOUNT: ~~120210000160~~ AMOUNT:

AUTHORIZED SIGNATURE

Jeremiah Academy, Inc

BUSINESS

DOCUMENT #

☐ Walk in

☐ Pick up time

☐ Mail out

☐ Will wait

☐ Photocopy

☒ Certified Copy of Articles

☒ Certificate of Status

NEW FILINGS

☐ Profit

☐ Not for Profit

☐ Limited Liability

☐ Domestication

☐ Other

☒ CORP

OTHER FILINGS

☐ Annual Report

☐ Fictitious Name

☐ APOSTILLE () ☐ Country

AMMENDMENTS

☐ Amendment

☐ Resignation of R.A. Officer/Director

☐ Change of Registered Agent

☐ Dissolution/Withdrawal

☐ Merger

☐ Conversion

☐ Revocation

REGISTRATION/QUALIFICATIONS

☐ Foreign filing

☐ Limited Partnership

☐ Reinstatement

☐ Other

EXAMINER'S INITIALS: _____

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

SUBJECT: JEREMIAH ACADEMY, 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

xx \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Dawnise Mobley / Jeremiah Academy, Inc.

Name (Printed or typed)

829 NW 167th Street

Address

Miami Gardens, FL. 33169

City, State & Zip

954-483-8944

Daytime Telephone number

jeremiahacademy@aol.com

E-mail address: (to be used for future annual report notification)

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

ARTICLE I NAME

The name of the corporation shall be: JEREMIAH ACADEMY, INC.

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address	Mailing address, if different is:
<u>829 NW 167th Street</u>	<u></u>
<u>Miami Gardens, FL. 33169</u>	<u></u>
<u></u>	<u></u>

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Corporation is established to operate a private school for children K-Grade 10.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Dawnise Mobley, President</u>	Name and Title: <u>Helen Golden, Director</u>
Address <u>3695 SW 15 Street</u>	Address: <u>12832 St. Mary Street</u>
<u>Fort Lauderdale, FL. 33312</u>	<u>Detroit, MI. 48227</u>
<u></u>	<u></u>
Name and Title: <u>Rose Deal, Director</u>	Name and Title: <u></u>
Address <u>3960 NW 173 Terrace</u>	Address: <u></u>
<u>Miami Gardens, FL. 33055</u>	<u></u>
<u></u>	<u></u>
Name and Title: <u></u>	Name and Title: <u></u>
Address <u></u>	Address: <u></u>
<u></u>	<u></u>
<u></u>	<u></u>

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Dawnise Mobley
Address: 829 NW 167th Street
Miami Gardens, FL. 33169

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Dawnise Mobley
Address: 3695 SW 15th Street
Fort Lauderdale, FL. 33169

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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 on 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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Dawnise Mobley

Required Signature/Registered Agent

07/12/2022

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in this document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Dawnise Mobley

Required Signature/Incorporator

07/12/2022

Date