P22000093662

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u></u>

Office Use Only



800398667798

12/19/22--01011--004 **70.00

SECRETARY OF STATE

FILED 22 DEC 19 PM 8: 29 Here are the simple, easy-to-follow instructions to complete the filing of your Articles of Incorporation:

- 1) Print TWO copies of the attached document and sign both.
- 2) Make a check for money order payable to "Florida Department of State" for \$70
- 3) Place the following inside an envelope:
 - a) BOTH copies of the Articles of Incorporation (from step 1).
 - b) The check to the Department of State for \$70.
 - c) A self-addressed stamped envelope.
- 1) Mail the whole set off. The address is:

New Filing Section Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

2) You will receive one copy of the Articles of Incorporation back, which has been stamped by the Department of State. Make a copy and send it to us (or fax or email it).



COVER LETTER

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

SUBJECT:	CULTIVATE	OUR CULTURE	S INC	
3000CC1	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:	
X \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	& Certificate of Status	
		ADDITIONAL CO	DPY REQUIRED	
FROM:		nian James e (Printed or typed)		
		elissa place	22 C	
	•	ort, FL 33837	DEC 19 CRETARY JAHASSE	
	City, State & Zip (909)264-4554		PM &: 2 OF STA E. FLOOR	D
		relephone number ames@yahoo.c	com	
		d for future annual report i		

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)

	PAL OFFICE rincipal <u>street</u> address	i	Mailing address, if different is:
	, —		_
<u>111 Melissa</u> Davenport, F			11 Melissa Place Davenport, FL 33837
TLE III PURPOS rpose for which the	SE corporation is organized is: Manage	gement	
LE V INITIAL Name and Title:	Ock is: 25,000 of common stoo OFFICERS AND/OR DIRECTORS Corinthian James- Directo 111 Melissa Place	[Name and Title.	
nber of shares of st	Ock is: 25,000 of common stoo OFFICERS AND/OR DIRECTORS Corinthian James- Directo 111 Melissa Place		Corinthian James - CEO
nber of shares of st LE V INITIAL Name and Title: Address	OFFICERS AND/OR DIRECTORS Corinthian James- Directo 111 Melissa Place Davenport, FL 33837 Corinthian James - CFO 111 Melissa Place	[Name and Title.	Corinthian James - CEO 111 Melissa Place Davenport, FL 33837

Name and	Title:	Name and Title:	
Address		Address:	
	EGISTERED AGENT rida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Corinthian James		
Address:	111 Melissa Place		
	Davenport, FL 33837		
<u>ARTICLE VII - JE</u>	NCORPORATOR		
The name and add	ress of the Incorporator is:		
Name:	Corinthian James		
Address:	111 Melissa Place		
	Davenport, FL 33837		
			22 SEC TALL
	EFFECTIVE DATE: her than the date of filing:	. (OPT10	NAL) ARE RE T
(If an effective dat filing.)	te is listed, the date must be specific and ca	nnot be more than five d	lays prior or 90 thays after the
	nserted in this block does not meet the applicate on the Department of State's reco		
Havino been name	d as registered agent to accept service of proce	ess for the above stated care	paration at the place designated in this
certificate, I am fan	niliar with and accept the appointment as reg	istered agent and agree to	
I mithis	Required Signature/Registered Agent		12/15/32
£'	1 /		/ / Date
	ndnt and affirm that the facts stated herein parament of State constitutes a third degree fo		
Jointheas	n ames		19/15/22
Required Signature	/Incorporator		Date / /
(

FILED
22 DEC 19 PH 8: 28

SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

INSTRUCTIONS FOR A PROFIT CORPORATION

The following are instructions, a cover letter and sample articles of incorporation pursuant to Chapter 607 and 621 Florida Statutes (F.S.).

NOTE: THIS IS A BASIC FORM MEETING MINIMAL REQUIREMENTS FOR FILING ARTICLES OF INCORPORATION.

The Division of Corporations strongly recommends that corporate documents be reviewed by-your legal counsel. The Division is a filing agency and as such does not render any legal, accounting, or tax advice.

This office does not provide you with corporate seals, minute books, or stock certificates. It is the responsibility of the corporation to secure these items once the corporation has been filed with this office.

Questions concerning S Corporations should be directed to the Internal Revenue Service by telephoning 1-800-829-1040. This is an IRS designation, which is not determined by this office.

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your corporate name selection.

Pursuant to Chapter 607 or 621 F.S., the articles of incorporation must set forth the following:

Article I: The name of the corporation **must** include a corporate suffix such as Corporation. Corp., Incorporated, Inc., Company, or Co.

A Professional Association **must** contain the word "chartered" or "professional association" or "P.A.".

Article II: The principal place of business and mailing address of the corporation. The principal address must be a <u>street</u> address. The mailing address, if different, can be a P.O. Box address.

Article III: Specific Purpose for a "Professional Corporation"

Article IV: The number of shares of stock that this corporation is authorized to have **must** be stated.

Artícle V: 1 The names, address and titles of the Directors/Officers (optional). The names of

officers/directors may be required to apply for a license, open a bank account, etc.

The name and Florida Street address (P.O. Box NOT acceptable) of the initial Registered Article VI:

Agent. The Registered Agent must sign in the space provided and type or print his/her

name accepting the designation as registered agent.

Article VII: The name and address of the Incorporator. The Incorporator **must** sign in the space

provided and type or print his/her name below signature.

The "incorporator" is the person who prepares and signs the Articles of Incorporation and then submits them for filing to the Division of Corporations. The function of the incorporator usually ends after the corporation is filed.

An Effective Date: Add a separate article if applicable or necessary: An effective date may be

added to the Articles of Incorporation, otherwise the date of receipt will be the file date. (An effective date can not be more than five (5) days prior to the date of receipt or ninety (90) days after the date of filing). If a corporation is filed

anytime prior to December 31st, an annual report will be due on January 1st.

Important Information About the Requirement to File an Annual Report

All Florida Profit Corporations must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1st and May 1st. The fee for the annual report is \$150. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1st, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

The fee for filing a profit corporation is:

Filing Fee \$35.00 Designation of Registered Agent \$35.00

Certified Copy (optional) \$ 8.75 (plus \$1 per page for each page over 8, not to exceed a

maximum of \$52.50).

\$ 8.75 Certificate of Status (optional)

Make checks payable to: Florida Department of State

Mailing Address:

New Filing Section Department of State Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

(850) 245-6052

Street Address:

New Filing Section Department of State Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

(850) 245-6052

COVER LETTER

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

SUBJECT:	CULTIVATE	OUR CULTURE	SINC	
Sobstical.	(PROPOSED CORPORATE NAME - <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	d a check for:	
X \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO		
FROM:		nian James		
		elissa place		
		Address	22 C SEC TALL	
	•	ort, FL 33837	22 DEC 19 SECRETARY TALLAHASSI	_
	(909)	. State & Zip)264-4554	PA PA	ק ו
	•	Telephone number	STATE STATE AND ADDRESS TARE	
	-	ames@yahoo.d	30III ·-	

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)

he name of the corporat RTICLE II PRINC	TPAL OFFICE			
	Principal <u>street</u> address	ì	Mailing address, if different is:	
111 Melissa Place			11 Melissa Place	
Davenport,	FL 33837		Davenport, FL 33837	
RTICLE III PURPO he purpose for which t	OSE Manage he corporation is organized is:Manage	ement		
			22 SE	<u>—</u>
<u>rticle v - initi</u>	stock is: 25,000 of common stoc		9 PH SSEE.	FILED
he number of shares of RTICLE V INITLE	stock is: 25,000 of common stoc		EF OF	FILEDO
he number of shares of **RTICLE V INITIA** Name and Title	stock is: 25,000 of common stock LOFFICERS AND/OR DIRECTORS :- Corinthian James- Director	Name and Title	िह्न द्वि Corinthian James - ट्विट	FILEUO
he number of shares of **RTICLE V INITIA** Name and Title	LOFFICERS AND/OR DIRECTORS Corinthian James- Director 111 Melissa Place Davenport, FL 33837 Corinthian James - CFO 111 Melissa Place	Name and Title Address:	Corinthian James - CE 111 Melissa Place	
he number of shares of **RTICLE V INITIA** Name and Title Address Name and Title	LOFFICERS AND/OR DIRECTORS Corinthian James- Director 111 Melissa Place Davenport, FL 33837 Corinthian James - CFO 111 Melissa Place	 Name and Title Address: Name and Title 	Corinthian James - EE 111 Melissa Plaee Davenport, FL 33837	
he number of shares of RTICLE V INITL Name and Title Address Name and Title Address	LOFFICERS AND/OR DIRECTORS Corinthian James- Director 111 Melissa Place Davenport, FL 33837 Corinthian James - CFO 111 Melissa Place	Name and Title Address: Name and Title Name and Title Address;	Corinthian James - EL 111 Melissa Place Davenport, FL 33837	

Name and Tit	tle: 5	Vame and Title:
Address		Address:
		
	<u>HSTERED AGENT</u> la street address (P.O. Box NOT acceptable) of th	e registered agent is:
	Corinthian James	- regulation and the second se
Name:	111 Melissa Place	
Address:		
. —	Davenport, FL 33837	
	7	
<u>ARTICLE VII INC</u>		
The name and addre	ss of the Incorporator is:	
Name:	Corinthian James	
Address:	111 Melissa Place	
	Davenport, FL 33837	
ARTICLE VIII EF	FECTIVE DATE:	
Effective date, if other (If an effective date)	er than the date of filing: is listed, the date must be specific and cannot be	
filing.)	•	SEC SEC
Note: If the date inse	erted in this block does not meet the applicable st	atutory filing requirements, this diffewill bet be listed as
the document's effect	tive date on the Department of State's records.	SSS TO
Having been named o	us registered agent to accept service of process for .	the above stated corporation at the place designated in his
20 A. 1 C. 1	at the state of th	agent and agree to act in this capacity. 💍 😠
outhern	1) James	12/15/32 Date
7	Required Signature/Registered Agent	/ Daté
- I submit this docume	ent and affirm that the facts stated herein are truggment of State constitutes a third degree felony a	ue. I am aware that the false information submitted in a
aocumențio ine isepe		, 1
Required Signature/I	ncorporator	
Required Signature/1.		/ /
ł	V	