

P22044041025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

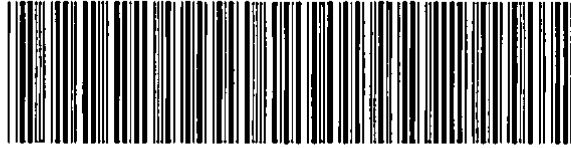
(Document Number)

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Office Use Only

**T. SCOTT**  
**MAY 26 2022**



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05/27/22--01001--001 \*\*78.75

22 MAY 26 PM 3:27  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2022 MAY 26 PM 3:27

RECEIVED

COVER LETTER

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

SUBJECT: Friends of Greg James for district 8 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

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

**ADDITIONAL COPY REQUIRED**

FROM: Gregory James  
Name (Printed or typed)

1123 Abraham St.  
Address

Tallahassee, FL 32304  
City, State & Zip

850-815-0206  
Daytime Telephone number

info@gregjamesfordistrict8.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

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

ARTICLE I NAME

The name of the corporation shall be: Friends of Greg James for District 8 Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 4409 Blountstown Hwy Tallahassee, FL 32304

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Campaign

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Al Smith / Treasurer Name and Title: Gregory James / President
Address: 818 W. Brevard St. Tallahassee, FL 32304 Address: 1123 Abraham St Tallahassee, FL 32304

Name and Title: Juvonda Steward / Campaign Administrator VP Name and Title:
Address: 1402 Daniels St. Tallahassee, FL 32310 Address:

Name and Title: Christic Henry / Campaign Manager - Director Name and Title:
Address: 1315 E Lafayette St Suite A Tallahassee, FL 32301 Address:

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: Yvonda Steward  
Address: 1402 Daniels St.  
Tallahassee, FL 32310

**ARTICLE VII INCORPORATOR**

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

Name: Yvonda Steward  
Address: 1402 Daniels St.  
Tallahassee, FL 32310

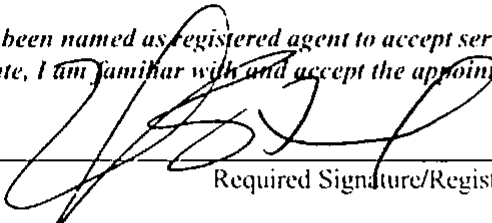
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 5-26-22 (OPTIONAL)

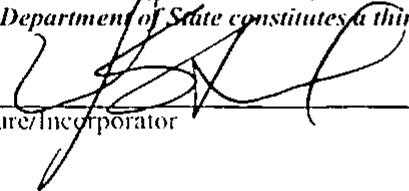
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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 5-26-22 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 5-26-22 Date