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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 AUG 27 PM 12:33

APPROVED
AND
FILED

cm 867

COVER LETTER

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

SUBJECT: **Compassionate Learning Community, Inc**
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: **Philip Hanson Hiss, Inc**
Name (Printed or typed)

718 Gwen Street

Address

Tallahassee, FL 32303

City, State & Zip

850-251-3869

Daytime Telephone number

philiphiss@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

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

Compassionate Learning Center, Inc

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

718 Gwen Street, Tallahassee, FL 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

An educational community based on permaculture principles sharing the best of our knowledge with the world.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

consensus-as stated in the bylaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Philip Hanson Hiss, IV, 718 Gwen Street, Tallahassee, FL 32303 President

Raven Jewell, 718 Gwen Street, Tallahassee, FL 32303 Chief Financial Officer

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

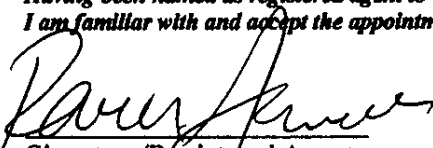
Raven Jewell, 718 Gwen Street, Tallahassee, FL 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

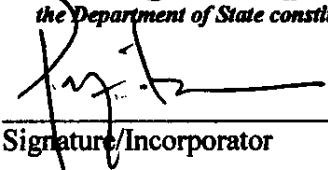
Philip Hanson Hiss, IV, 718 Gwen Street, Tallahassee, FL 32303

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


Signature/Registered Agent

8-27-13 12:30 pm
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.


Signature/Incorporator

8-27-13 12:30 pm
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 AUG 27 PM 12:33

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AND
FILED