

N18000004995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

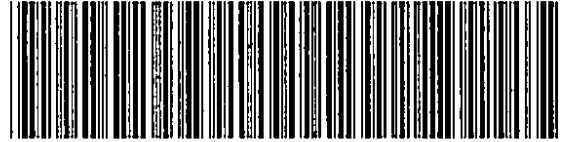
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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

18 MAY -8 PM 2:13

311



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 24, 2018

MATTHEW RASCOVICH
1730 NW 55 TR
GAINESVILLE, FL 32605

SUBJECT: VETERANS ASSISTING VETERANS INC
Ref. Number: W18000038373

RECEIVED
2018 MAY -8 AM 10:56
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for VETERANS ASSISTING VETERANS INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. <http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Nadira D McClees-Sarns
Regulatory Specialist II

Letter Number: 418A00008252

RECEIVED
2018 MAY -8 PM 2:13
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Veterans assisting veterans 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: Matthew Rascovich
Name (Printed or typed)

1730 nw 55 tr
Address

gainesville, FL 32605
City, State & Zip

3522811610
Daytime Telephone number

rascovich@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: Veterans Assisting Veterans INC

ARTICLE II PRINCIPAL OFFICE

Principal street address: <u>1730 NW 55 tr Gainesville FL 32605</u>	Mailing address, if different is: <u></u>
<u></u>	<u></u>
<u></u>	<u></u>

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: This corporation is organized exclusively for charitable, religious and education
as specified in Section 501(c)(3) of the Internal Revenue Code, including for such purposes, the making of distributions to
organizations that qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code,
or the corresponding section of any future federal tax code.
The purpose of this corporation is to help Veterans with everyday life and the betterment of the goals.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Majority Vote

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Director Matthew Rascovich</u> Address: <u>1731 NW 55 tr Gainesville FL 32605</u>	Name and Title: <u>Administrator Jeff Gruver</u> Address: <u>1106 nw 30th ave</u> <u>Gainesville, FL 32609</u>
Name and Title: <u>Officer Shaunita Wells</u> Address: <u>1112 se 7th ave</u> <u>Gainesville, FL 32601</u>	Name and Title: <u>Officer Rachael Wacha</u> Address: <u>4488 nw 6th street</u> <u>Gainesville, fl 32609</u>
Name and Title: <u>Officer Silvia Hunkins</u> Address: <u>1731 nw 55 tr</u> <u>Gainesville, FL 32605</u>	Name and Title: <u>AR Oscar Rodriguez</u> Address: <u>214 SW 91st tr suite A</u> <u>Gainesville, FL 32608</u>

FALL THROUGH SHEET FOR JVA

18 MAY -8 PM 2:13

JVA

Name and Title: _____ Name and Title: _____
 Address _____ 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: Matthew Rascovich
 Address: 1730 nw 55 tr
gainesville, fl 32605

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Matthew Rascovich
 Address: 1730 nw 55 tr
gainesville, fl 32605

FILED
 18 MAY - 8 PM 2:13
 TALLAHASSEE, FLORIDA

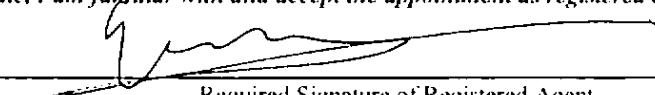
ARTICLE VIII EFFECTIVE DATE:

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 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 of Registered Agent

2/5/18
 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.


 Required Signature of Incorporator

2/5/18
 Date