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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

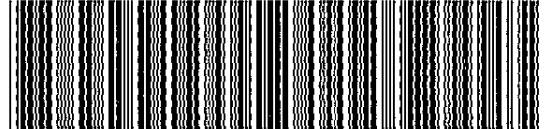
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06 JAN 13 PM 2:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

06 JAN 13 PM 2:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: CAPITAL AREA HEALTH ACCESS FOUNDATION, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

+ 8.25 = 96.
- 1- additional
certificate.

FROM: H. Michael Madsen, Vickers Madsen & Goldman, LLP
Name (Printed or typed)

1705 Metropolitan Blvd., Suite 101
Address

Tallahassee, FL 32308-3765
City, State & Zip

850.523.0400

Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not For Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I. NAME

The name of the corporation shall be: CAPITAL AREA HEALTH ACCESS FOUNDATION, INC.

ARTICLE II. PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation is:

2140 Centerville Place
Tallahassee, FL 32308

ARTICLE III. PURPOSE(S)

The purpose for which the corporation is organized is exclusively for the promotion of social welfare under Section 501(c)(4) of the Internal Revenue Code, or corresponding section of any future federal tax code.

ARTICLE IV. MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is set forth in the Bylaws.

ARTICLE V. INITIAL REGISTERED AGENT AND STREET ADDRESS

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

H. Michael Madsen
1705 Metropolitan Blvd., Suite 101
Tallahassee, Florida 32308-3765

ARTICLE VI. INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation:

H. Michael Madsen
1705 Metropolitan Blvd., Suite 101
Tallahassee, Florida 32308-3765

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 JAN 13 PM 3:00

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ARTICLE VII. CHARITABLE ORGANIZATIONS PROVISIONS

Notwithstanding any powers granted to the Corporation by its Articles, Bylaws or by the laws of the State of Florida, the following limitations of power shall apply:

a. No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to any private shareholder or individual, except that the Corporation shall be authorized and empowered to pay reasonable compensation for the services rendered and to make payments and distributions in furtherance of purposes set forth in the purpose clause hereof.

b. No substantial part of the activities of the Corporation shall be the participation in, or intervening in (including the publishing or distribution of statements) any political campaign on behalf of (or in opposition to) any candidate for public office.

c. Notwithstanding any other provision of this document, the organization shall not carry on any other activities not permitted to be carried on by an organization exempt from federal income tax under Code Section 501(c)(4).

c. Upon dissolution of the Corporation, assets shall be distributed for one or more exempt purposes within the meaning of Code Sections 501(c)(3) or 501(c)(4), or shall be distributed to the federal government, or a state or local government, for public purpose. Any such assets not so disposed of shall be disposed of by the court having jurisdiction over the Corporation, exclusively for such purposes or to such organization or organizations, as said court shall determine, which are organized and operated exclusively for such purposes.

Michael Elade

Signature/Incorporator

13 Jan 06

Date

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Michael Elade

Signature/Registered Agent

13 Jan 06

Date