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(Add	dress)	
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(Cit	y/State/Zip/Phone #)
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COVER LETTER

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

SUBJECT: Set Free Counseling 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

X S87.50

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Krystal Rusch ICSW

11811 Branch Mooring Dr

Tampa FL 33635
City, State & Zip

813 944 0029

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

2022 SEP 23 AM 4: 17 SECRETARY OF STATE

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

ARTICLE I NAME The name of the corporation shall be: Set Free Cow	rseling Inc
ARTICLE II PRINCIPAL OFFICE	9
Principal <u>street</u> address: 11811 Branch Moving Dr	Mailing address, if different is:
Tampa FL 33635	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Set Free	Counseling will provide
low to free or probono.	therapy services to
religous affiliatés, finan distressed indviduals.	cially needy or
ARTICLE IV MANNER OF ELECTION The manner in which the direction of the Bylaw 5. ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	the board of directors in occord
Name and Title: Krystal Rusch President Name and Title: Krystal Rusch	Roy Rusch Vice President
Address 11811 Brach Mooring Riddress:	11811 Branch Moving Dr
	Tampa FL 33635
Name and Title: Karen Hanson D ame and Title	Esmeralda Denton D
Address 308 Fantanview ar Address:	3016 Amelia way
Oldsmar FL 34677	Palm Halbor FL 34684
Name and Title: Paul Seiden D ame and Title	(5) 22
Address 1502 Phode Well WAddress:	TALLE
Dover FL 33527	SECRETARY SECRETARY
<u>,</u>	No. of Market
	M 4:17
	17 ATE

Name and Title:	Name and Title:	_	
Address	Address:	<u>-</u> -	
		-	
		-	
Name and Title:	Name and Title:	-	
Address	Address:	_	
		_	
			
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT accept	ptable) of the r egiste red agent is:		
Name: Krystay Rusch			
11A11 Proach m	Dring Dr		
Address: UNIT OF COLO 1170 Tampa FL 330	1035	2022	
14111100 10 300	ALI	2 SE	
ARTICLE VII INCORPORATOR		, ——	Contraction of the contraction o
The <u>name and address</u> of the Incorporator is:	Allasses)	ည္γ 	
Name: Knystal Rusch			
Address: 11811 Bronch	11)00011/1 L	AM 4: 17	14.
Tampa FL 336	035	mi -	
ARTICLE VIII EFFECTIVE DATE:	(OPTIONAL)		
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific a	. (OPTIONAL) nd cannot be more than five days prior or 90 days after	er the filin	g.)
Note: If the date inserted in this block does not meet the a document's effective date on the Department of State's rec	applicable statutory filing requirements, this date will not cords.	be listed as	s the
Having been named as registered agent to accept service certificate, I am familiar with and accept the appointment of	of process for the above stated corporation at the place as registered agent and agree to act in this capacity	e designate	d in this
Required Signature of Registered	9/23	3/2=)
I submit this document and affirm that the facts stated here	ein are true. I am aware that any false information submitt	ted in a doc	ument to
the Department of State constitutes a third degree felony as	s provincu jor in s.017.155, r.s.	1 ~ ~	
Required Signature of Inco	orporator $\frac{7 \mid 33 \mid}{\text{Date}}$	<u>0</u> 0	

To whom it may concern,

I Krystal Ann Rusch owner of Set Free Counseling LLC, would like to release my business name SET FREE

counseling ic. To revoke the dissolution of Set Free consting Re counseling uc.

Thank you,

Krystal Rusch, LCSW Kuplekison, LCSW

N303055

