F20000000418

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
ed Copies Certificates of Status						
cial Instructions to Filing Officer:						
emailed cept 1/13/20						
W19000110280						

Office Use Only



400337300174

11/25/19--01046--010 **75.75

2020 JAN 13 PH 3: 49

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Clear Path Foundation Corporation Name of Corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.
Please return all correspondence concerning this matter to the following:
Royald Dix Name of Person
Clear Poth Faredakin
7265 Golf Pointe Way Address
Sava Sota Plovida 34243 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Royald Dix at (248) 6607542 Area Code Daytime Telephone Number
MAILING ADDRESS: Registration SectionSTREET/COURIER ADDRESS: Registration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE \$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status Certified Copy \$875.50 Filing Fee, Certificate of Status &

Certified Copy

PPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO

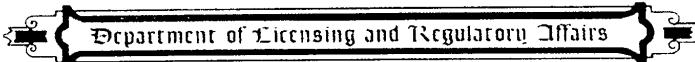
GISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN E STATE OF FLORIDA: or "CORPORATION" or words or abbreviations of like lame of corporation: must include the word "INCORPORATED" aport in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.) If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.) Sava So Ta (Current mailing Name and street address of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) ice Address: Registered agent's acceptance: ving been named as registered agent and to accept service of process for the above stated corporation at the place ignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I ther agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, 1 I am familiar with and accept the obligations of my position as registered agent. Registered agent's signature) Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to

the Department of State, by the Secretary of State or other official having custody of corporate records in the

jurisdiction under the law of which it is incorporated.

nairman ice Chairman irector resident ice President ecretary Other:	Address:	□Treasurer
resident ice President ecretary Other:		□Treasurer □ Other:
resident ice President ecretary Other:		□Treasurer □ Other:
ice President ceretary Other: hairman		☐Treasurer ☐ Other:
ecretary Other: hairman		☐Treasurer ☐ Other:
Other:		
	Name:	
ice Chairman		.
	Address:	
irector		
resident		
ice President		
ecretary		□Treasurer
Other:		Other:
hairman	Name:	2070 JA
		- · · · · · · · · · · · · · · · · · · ·
		P
		ب ب ب
		9
	***	□Treasurer
-		☐ Other:
	Thairman Tice Chairman Director Testident Tice President Ceretary Other: The attachment	Chairman Name: Director resident





Lansing, Muchigan

This is to Certify That

CLEAR PATH FOUNDATION

was validly Incorporated on August 1, 2019 as a Michigan nonprofit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1982 PA 162 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to conduct affairs in Michigan and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and cradit given it in every court and office within the United States.

OTHER COMMERCIAL COMME

Sent by electronic transmission

Certificate Number: 20018153550

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 21st day of January, 2020.

Linda Clegg, Interim Director

Corporations, Securities & Commercial Licensing Bureau

Verify this certificate at: URL to eCertificate Verification Search http://www.michigan.gov/corpverifycertificate.



Business Entity Results

ımber of Records: 1

Print Res

intity Name	ID Number	Old ID Number	Address
LEAR PATH FOUNDATION	802347272		P.O. BOX 566 OXFORD, MI 48371 USA

New Search

LARA FOIA Process

Transparency

Office of Regulatory Reinvention State Web Sites

Michigan.gov Home

ADA

Michigan News

Policies

Copyright 2019 State of Michigan

ID Number: 802347272 Summary for: CLEAR PATH FOUNDATION

The name of the DOMESTIC NONPROFIT CORPORATION: CLEAR PATH FOUNDATION

Entity type: DOMESTIC NONPROFIT CORPORATION

Identification Number: 802347272

Date of Incorporation in Michigan: 08/01/2019

Purpose: Other

Term: Perpetual

Most Recent Annual Report with Officers & Directors: Most Recent Annual Report:

The name and address of the Resident Agent:

Resident Agent Name:

RONALD DIX

Street Address:

3600 BARBER RD

Apt/Suite/Other:

City:

OXFORD

State:

M

Zip Code:

Request certificate

New Search

48371

Registered Office Mailing address:

P.O. Box or Street Address:

P.O. BOX 566

Apt/Suite/Other:

City:

OXFORD

State:

MI

Zip Code:

48371

Act Formed Under: 162-1982 Nonprofit Corporation Act

Acts Subject To: 162-1982 Nonprofit Corporation Act

The corporation is formed on a Directorship basis.

Written Consent

View filings for this business entity:

ANNUAL REPORT/ANNUAL STATEMENTS ARTICLES OF INCORPORATION ARTICLES OF INCORPORATION RESTATED ARTICLES OF INCORPORATION

vice faings

Form Revision Date 07/2016

ARTICLES OF INCORPORATION

For use by DOMESTIC NONPROFIT CORPORATION

Pursuant to the provisions of Act 162, Public Acts of 1982, the undersigned corporation executes the following Articles:

ARTICLE I

The name of the corporation is:

TH FOUNDATION

ARTICLE II

se or purposes for which the corporation is formed are:

Charitable Purpose Corporation. To provide resources, services, programs, projects and related planned and emergency to individuals that are less prepared, less capable, less accomplished and seeking self-reliance, self-actualization, self

ARTICLE III

iration is formed upon on a stock basis, the total number of shares the corporation has authority to issue is on a nonstock basis, the description and value of its real property assets are (if none, insert "none"): iption and value of its personal property assets are (if none, insert "none"): pration is to be financed under the following general plan: RESOURCES, GIFTING, FUND RAISING, GRANTS. oration is formed on a basis.

basis.

ARTICLE IV

t address of the registered office of the corporation and the name of the resident agent at the registered office (P.O. e not acceptable):

Name: RONALD DIX 3600 BARBER RD Address:

lite/Other: OXFORD

ΜI

ered Office Mailing Address:

ox or Street

P.O. BOX 566

uite/Other:

OXFORD

Zip Code: 48371

Zip Code: 48371

ARTICLE V

s) and address(es)	of t	he	incorporator(s)	is	(are)	as	follows
5) and adoress(es).	OI L		Ilicor por acor (3)		()		

	i e i i e		i o	Residence or Business Address	Ä
NTV.				3600 BARBER RD, OXFORD, MI 48371 USA	•

s 30th Day of July, 2019 by the incorporator(s).

。	"不是我们的"。 "我们是我们的一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	Other, was selected
x	Incorporator	
	• • • •	

ng ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify e best of my knowledge the information provided is true, accurate, and in compliance with the Act.

[↑] Accept Decline

ICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS FILING ENDORSEMENT

s is to Certify that the ARTICLES OF INCORPORATION

for

EAR PATH FOUNDATION

ID Number: 802347272

eived by electronic transmission on July 30, 2019 , is hereby endorsed.

ed on August 01, 2019 , by the Administrator.

e document is effective on the date filed, unless a subsequent effective date within 90 days after eived date is stated in the document.



In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 1st day ω

of August, 2019.

3: 5(

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau

IRS DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

13 PH 10-16-00

Date of this notice 10-16-2019

Employer Identification Number: 84-3384818

Form: SS-4

Number of this notice: CP 575 E

For assistance you may call us at: 1-200-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

CLEAR PATH FOUNDATION % RONALD PO BOX 566 OXFORD, MI 48371

EW#84-3384818

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 84-3384818. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

When you submitted your application for an EIN, you checked the box indicating you are a non-profit organization. Assigning an EIN does not grant tax-exempt status to non-profit organizations. Publication 557, Tax-Exempt Status for Your Organization, has details on the application process, as well as information on returns you may need to file. To apply for recognition of tax-exempt status under Internal Revenue Code Section 501(c)(3), organizations must complete a Form 1023-series application for recognition. All other entities should file Form 1024 if they want to request recognition under Section 501(a).

Nearly all organizations claiming tax-exempt status must file a Form 990-series annual information return (Form 990, 990-EZ, or 990-PF) or notice (Form 990-N) beginning with the year they legally form, even if they have not yet applied for or received recognition of tax-exempt status.

Unless a filing exception applies to you (search www.irs.gov for Annual Exempt Organization Return: Who Must File), you will lose your tax-exempt status if you fail to file a required return or notice for three consecutive years. We start calculating this three-year period from the tax year we assigned the EIN to you. If that first tax year isn't a full twelve months, you're still responsible for submitting a return for that year. If you didn't legally form in the same tax year in which you obtained your EIN, contact us at the phone number or address listed at the top of this letter.

For the most current information on your filing requirements and other important information, visit www.irs.gov/charities.

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201

Date: DEC 13 2019

CLEAR PATH FOUNDATION 3600 BARBER RD OXFORD, MI 48371-0000 Employer Identification Number: 84-3384818 DLN: 26053726001339 Contact Person: ID# 31954 CUSTOMER SERVICE Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Public Charity Status: 509(a)(2) Form 990/990-EZ/990-N .Required: Effective Date of Exemption: August 01, 2019 Contribution Deductibility: Addendum Applies:

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

steplen a martin

Director, Exempt Organizations Rulings and Agreements

9090 1AN 13 PH 3:51