

F22000004800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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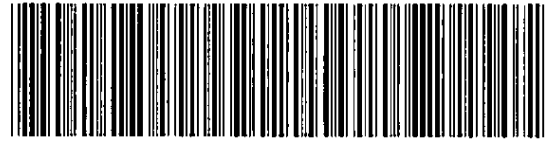
(Business Entity Name)

(Document Number)

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2022 JUL 19 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CHG 01 2022
K. Brumby

COVER LETTER

TO: Registration Section
Division of Corporations
CREATING ALTERNATIVE REASONS TO EXCEL, INC

SUBJECT: _____
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:

ROCHELLE BANKHEAD

Name of Person

C.A.R.E. INC

Firm/Company

9420 TOWNE SQUARE AVENUE SUITE 18

Address

BLUE ASH, OH 45242

City/State and Zip Code

info@reasonstoexcel.org

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

For further information concerning this matter, please call:

ROCHELLE BANKHEAD

513

473-3979

Name of Person at (_____) _____
Area Code Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RECEIVED
MAR 15 2022

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 & ☐ \$87.50 Filing Fee.

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

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:

CREATING ALTERNATIVE REASONS TO EXCEL, INCORPORATED

1. _____
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in 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)

2. OHIO 3. 84-2993200
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 09/08/2019 5. 09/08/2024
(Date of Incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 618 E. South St. Suite 500, Orlando, FL 32801
(Principal office street address)

9420 Towne Square Avenue Suite 18, Blue Ash, OH 45242
(Current mailing address, if different)

8. To assist families with different needs not limited to housing, clothing, food and community services
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Donyale Swann
Office Address: 618 E. South St. Suite 500
Orlando, Florida 32801
(City) (Zip Code)

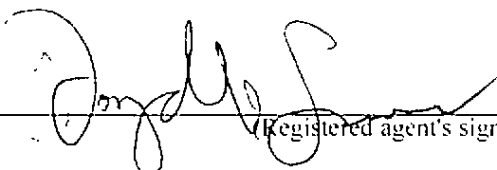
SECRETARY OF STATE
TALLAHASSEE, FL 32304

2022 JUL 19 PM 2:50

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AND
FILED

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

11. 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.

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☒ Chairman Name: Rochelle Bankhead
6200 Colerain Ave.
☐ Vice Chairman Address: _____
Cincinnati, OH 45251
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Lisa Meatchem
6633 Abell Ct.
☐ Vice Chairman Address: _____
Cincinnati, OH 45247
☐ Director _____
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Tina Figgs
10613 Forestdale Dr.
☒ Vice Chairman Address: _____
Cincinnati, OH 45240
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Bridgette Cameron
6891 Grange Ct.
☐ Vice Chairman Address: _____
Cincinnati, OH 45239
☐ Director _____
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. Rochelle Bankhead
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
Rochelle Bankhead, Chairman

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show CREATING ALTERNATIVE REASONS TO EXCEL, an Ohio not for profit corporation, Charter No. 4377680, having its principal location in Cincinnati, County of Hamilton, was incorporated on September 8, 2019 and is currently in GOOD STANDING upon the records of this office.



*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 8th day of February, A.D. 2022.*

A handwritten signature in cursive script, appearing to read "Frank LaRose".

Ohio Secretary of State

Validation Number: 202203905210