

NO6000011019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

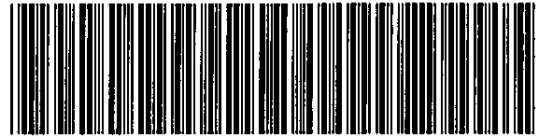
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FILED
2006 OCT 23 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: North Florida Outreach and Rehabilitative Services, 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: Thomas R. Horne, SR.
Name (Printed or typed)

4025 Clearbrook Cove Rd.
Address

Jacksonville, FL 32218
City, State & Zip

(904) 994-9112
Daytime Telephone number

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

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

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TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: North Florida Outreach
Rehabilitative Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Place of business unknown at this. Mailing address for now
will be: 4025 Clearbrook Cove Rd. Jax. FL 32218

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide daily feeding, program for the homeless and disadvantaged; along with
a Drop In Center housing, Transitional Housing to active participants of our
Barber Stylist Program, and other supportive services. Our target will be the homeless
displaced Vet's.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

All directors will be appointed by the President / CEO

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Thomas R. Horne, Sr.
President/CEO
4025 Clearbrook Cove Rd.
Jax. FL 32218

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Thomas R. Horne, Sr.
4025 Clearbrook Cove Rd.
Jax. FL 32218

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Thomas R. Horne, Sr.
4025 Clearbrook Cove Rd.
Jax. FL 32218

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.

Thomas R. Horne, Sr.
Signature/Registered Agent

10/18/06
Date

Thomas R. Horne, Sr.
Signature/Incorporator

10/18/06
Date