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# COVER LETTER

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

SUBJECT: The	e Poinciana	Center for	- Positive	Living, Inc	
SUBJECT: The Poinciana Center for Positive Living, 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	check# 2252 enclosed for 87.50, original and a copies of	
ADDITIONAL COPY REQUIRED 2 copies of Articles.					
FROM: Ruth Burgher-Gibore Name (Printed or typed)					
1954 Manatee Ct					
Poinciana Fl 34759 City, State & Zip					
Naytime Telephone number					
Roth. Burgher. Gibore, LMFT@ gmail. Com E-mail address: (to be used) for future annual report notification)					

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

APPHOYED AND FILED

#### ARTICLES OF INCORPORATION

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

99 JUL **29** PM 3: UL SECRETARY OF STATE TALLAHASSEE, FLORIDA

### **ARTICLE I** NAME

The name of the corporation shall be:

The Poinciana Center for Positive Living, Inc.

#### ARTICLE I I PRINCIPAL OFFICE

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

1954 Manatee Court, Poinciana, Fl 34759

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Promoting Wellness and Empowering Community Members to help themselves enhance overall quality of life through work, education, counseling, social support, and advocacy. The corporation is organized exclusively for charitable, religious, and educational purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code. No part of the net earnings of the corporation shall insure the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the Corporate Purpose (Article III of this form) hereof. Upon dissolution of the corp. the Board Of Directors shall, after paying or adequately providing for all the debts, obligations, and liabilities of the Corporation, distribute the remaining assets of the Corporation exclusively for the nonprofit religious purposes to such organization or organizations which are tax-exempt under section 501c3 of the Code, as amended, as the Bd. of Directors in its sole discretion shall determine. The extent of personal liability, if any, for directors, officers, or members for corporate obligations and the methods of enforcement and collection are as follows: NONE.

#### **ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

The President shall select the Board of Directors



## **ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS:**

List name (s), addresses, and specific titles:

09 JUL 29 PH 3: 04

Ruth Burgher-Gibore, M.A., Licensed Marriage and Family Therapist, President Florida 34759

STATE

Ruth Burgher-Gibore, M.A., Licensed Marriage and Family Therapist, President Florida 34759

Christine Lewis, M.A., Officer, 1236 Apopka Lane, Poinciana, Florida, 34759

Robin Buggs, M.A., Officer, P.O. Box 130816, Tampa, Florida, 33681

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Ruth Burgher-Gibore, M.A., Licensed Marriage and Family Therapist 1954 Manatee Court Poinciana, Fl 34759

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is

Ruth Burgher-Gibore, M.A., Licensed Marriage and Family Therapist 1954 Manatee Court Poinciana, Fl 34759

Having been named as a 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.

\*

Luth Buylon-Share, MA, LMFT 7/23/09

Date

Date

The M.A. LMFT 7/23/09