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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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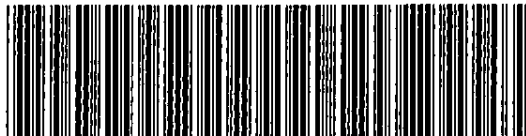
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

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

SUBJECT: Not Forgotten Heroes Foundation 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: Kelly L. Hurtado  
Name (Printed or typed)

PO Box 764  
Address

Islamorada FL 33036  
City, State & Zip

954-258-9330  
Daytime Telephone number

kellylhurtado@yahoo.com  
E-mail address: (to be used for future annual report notification)

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

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

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

**ARTICLE I NAME**

The name of the corporation shall be:

Not Forgotten Heroes Foundation Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

9008 SW 211 Lane Miami FL 33189 / Mailing Address: PO Box 764 Islamorada FL 33036

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Establish a foundation that helps veterans and their families by offering landscape and lawn maintenance service to the public. A percentage of profits acquired from these services will be donated directly to support additional veteran aid foundations as well as working with the local Veterans Affairs Centers. As well as, additionally providing future employment positions within for veterans struggling with the ability to find employment where they can be reintroduced to the work force.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

All positions were initially voluntary.

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

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

CEO/President - Kelly L. Hurtado PO Box 764 Islamorada FL 33036

Chair - Denis Hurtado PO Box 764 Islamorada FL 33036

Vice Chair - Thomas Roberts 9066 SW 73rd Ct. # 1004 Miami FL 33156

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Kelly L. Hurtado  
9008 SW 211 Lane  
Miami FL 33189

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Kelly L. Hurtado  
PO Box 764  
Islamorada FL 33036

\*\*\*\*\*

*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.*

Kelly L. Hurtado  
Signature/Registered Agent

2.28.10  
Date

Kelly L. Hurtado  
Signature/Incorporator

2.28.10  
Date

FILED  
10 MAR -5 PM 12:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA