

N10000004368

(Requestor's Name)

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(Business Entity Name)

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2010 MAY -3 P 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: _____

Safe Harbour Solutions, 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: Tremayne Thomas

Name (Printed or typed)

P.O. Box 9066

Address

Ft. Lauderdale, FL 33310

City, State & Zip

(954) 478-7492

Daytime Telephone number

safehs@att.net

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

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:

Safe Harbour Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Principal address is 2849 Shaughnessy Dr. Wellington, FL 33414.

Mailing address is P.O. Box 9066 Ft. Lauderdale, FL 33310.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This organization will provide counseling, behavioral and social skill development, and residential care, for youth in the dependency system. The program will also provide mentoring, while fostering resiliency in at risk youth.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors will be hired through an interview process with the appointed Board of Directors.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Tremayne Thomas 2849 Shaughnessy Drive, Wellington, FL 33414
President

Tarachell Thomas 2849 Shaughnessy Drive, Wellington, FL 33414
Vice President

George Spencer 2789 Shaughnessy Drive, Wellington, FL 33414
Executive Director

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Tremayne Thomas,
2849 Shaughnessy Drive
Wellington, FL 33414

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tremayne Thomas
2849 Shaughnessy Drive
Wellington, FL 33414

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.



Signature/Registered Agent

4/22/10

Date



Signature/Incorporator

4/22/10

Date

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2010 MAY -3 P 12:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA