

N11000D11478

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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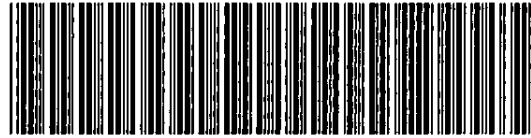
(Business Entity Name)

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11 DEC 12 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
12/13

COVER LETTER

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

SUBJECT: Ride for 5, 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: Robert M. Hoffman

Name (Printed or typed)

9155 S. Dadeland Blvd., Suite 1012

Address

Miami, Florida 33156

City, State & Zip

305-447-1680

Daytime Telephone number

rrrhof@aol.com

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different is:

ARTICLE I NAME

The name of the corporation shall be:

Ride for 5, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

9155 S. Dadeland Blvd.

Suite 1012

Miami, Florida 33156

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Organized exclusively for charitable, religious, educational, and scientific purposes, including, for such 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.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

The method of election of directors shall be as provided in the corporation's Bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Hoffman, Director

Address: 9066 SW 73 Court

Apartment 1608

Miami, Florida 33156

Name and Title:

Address:

Name and Title: Nick Weesner, Director

Address: 105 NE 22 Street

Apartment 1

Miami, Florida 33137

Name and Title:

Address:

Name and Title: Robert M. Hoffman, Esq., Director

Address: 9155 S. Dadeland Blvd.

Suite 1012

Miami, Florida 33156

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

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

Name: Robert M. Hoffman, Esq.

Address: 9155 S. Dadeland Blvd.

Suite 1012

Miami, Florida 33156

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Robert M. Hoffman, Esq.

Address: 9155 S. Dadeland Blvd.

Suite 1012

Miami, Florida 33156

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

Required Signature of Registered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature of Incorporator

Date