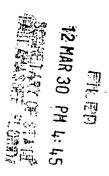
## N1200003418

(Requestor's Name)				
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(Cit	ty/State/Zip/Phone	· #)		
PICK-UP	☐ WAIT	MAIL		
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Certified Copies Certificates of Status				
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## **COVER LETTER**

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

SUBJECT: Secularists For a Better Today, Inc.					
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)					
Enclosed is an original	and one (1) copy of the Artic	les of Incorporation and	a check for:		
\$70.00 Filling Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL C	OPY REQUIRED		
			•		
FROM: Amanda Rose Poole					
Name (Printed or typed)					
2001 Hodges Blvd #918					
Address					
Jacksonville, FL 32224					
City, State & Zip					
904-303-9438					
Daytime Telephone number					

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

Andi.Rose.Poole@gmail.com
E-mail address: (to be used for future annual report notification)

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

The name of the co	rporation shall be: Secularists Fo	r a Better Too	day, Inc.
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address		Mailing address, if different is:
	2001 Hodges Blvd #918		
	Jacksonville, FL 32224	<del></del>	
ADTICLE III	DIRDOSE		
The nurnose for w	PURPOSE hich the corporation is organized is:		
	•	so to the hemoless	displaced LCPT people
	r communities by offering assistand gy, domestic violence survivors and support).		
ARTICLE IV	MANNER OF ELECTION The manner	in which the directors are o	elected and appointed:
	be appointed by founders at the ap		lent and Vice Presidents.
	INITIAL OFFICERS AND/OR DIRECT		•
	tle: Amanda Rose Poole, President	Name and Title:	
Address:	2001 Hodges Blvd #918 Jacksonville, FL 32224	Address:	
	Jacksonville, FL 32224	<del>-</del>	
	tle:Valerie McMellan, Vice President	Name and Title:	
Address:	300 Latonea Drive	Address:	
	Columbia, SC 29210		
			E 22
Name and Ti	tle:	Name and Title:	<b>生態 な</b>
Address:			<u> </u>
			₩ → 20
			<u> </u>
ARTICLE VI	REGISTERED AGENT		
	rida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Amanda Rose Poole		
Address:	2001 Hodges Blvd #918		5
	Jacksonville, FL 32224		
ARTICLE VII	INCORPORATOR		
	ress of the Incorporator is:		
Name:	Amanda Rose Poole		
Address:	2001 Hodges Blvd #918	<u> </u>	
	Jacksonville, FL 32224	<u> </u>	
Harina kom name	ed an manistanad anadit to account namica of ana	and for the above stated	l composation at the place designated in this
riuving been nume cortificate I am fan	ed as registered agent to accept service of pro nifar with and accept the appointment as regist	cess jor ine above siaiea arad agant and agrae to a	corporation at the place designated in this
cernificate, 1 am jun	aufair with and accept the appointment as regist	ereu ugent unu ugree to u	ci in inis capacity
	Tarella ~		3.28-2015
	Required Signature of Registered Agent		3-28-2017
_	required digitature of registered Agent		Date
	nent and affirm that the facts stated herein are		
to the Department o	of State constitutes a third degree felony as prov	ided for in s.817.155, F.S.	•
	$U_{\Lambda}/M_{\Lambda}$		7 -0 201
_/(1/	m//////		3-28-2012
	Required Signature of Incorporate	r	Date