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Division of Corporations

January 17, 2013

EMILY RICHESON 2115 MELANIE DR TALLAHASSEE, FL 32304

SUBJECT: THE OUTLET, LLC Ref. Number: W13000003546

We have received your document for THE OUTLET, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Pamela Smith Regulatory Specialist II

Letter Number: 513A00001414

COVER LETTER

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

SUBJECT: The Outlet Community Center, LLC					
	(PROPOSED CORPORAT	E NAME – <u>MUST INCL</u> I	<u>JDE SUFFIX</u>)		
Enclosed is an original a	nd one (1) copy of the Artic	eles of Incorporation and	l 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 CO	OPY REQUIRED		
FROM: Emily Richeson Name (Printed or typed)					
2115 Melanie Drive					
Tallahassee FL 32304 City, State & Zip					
Emily Richardime Telephone number					

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

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME The name of the corporation shall be:			SECRETARY OF STATE BIVISION OF CORPORATION
	•		13 FEB 26 PM 2: 00
ARTICLE II	PRINCIPAL OFFICE		
	Principal <u>street</u> address		Mailing address, if different is:
	Emily Richeson		
	2115 Melanie Dr Tallahassee, FL 32304		
ARTICLE III	PURPOSE		
The Outlet Community (space and core of volun- professional counseling, arts. With these services	which the corporation is organized is: Center is a Tallahassee community mental health resource organized as teers dedicated to working with those who come to us for help. By proving the center will make mental health care more accessible for all. To sussist and opportunities, the Outlet strives to enrich community ties in Tallaham, all liabilities and obligations of the Outlet will be paid and discharged,	ding a variety of services, including gro tain the space and cover the costs of o assee and remove the social stigms of	up and peer counseling, arts-based activities, and referrals to ounseling, it will have a dust function as a community space for the mental fillness while working toward making our city a healthier place.
ARTICLE IV	MANNER OF ELECTION The manne	r in which the directors are	elected and appointed:
	ers are one to three years. Nominations and votes are m four weeks prior to elections. Nomination and election w INITIAL OFFICERS AND/OR DIRECTION OF THE CONTRACTION OF T	ill occur in general meetings.	n by-laws. Candidates for directors should be
	Title: Emily Richeson - Director		cole McCaffrey
Address:	2115 Melanie Dr	Address: 63	1 E Call St Apt 502
	Tallahassee, FL 32304	Ta	llahassee FL, 32301
Name and	Title: Chanel Letourneau - Secretary	Name and Title: W	hitney Sigall - Mental Health Director
Address:	1817 W Call St Apt A10		
redicos.	Tallahassee, FL 32304	Ta	16 Branch St llahassee, 32303
Name and	Title:	Name and Title:	
Address:	110		
		<u></u>	
ARTICLE VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptable		:
Name:	Emily Richeson		
Address:	2115 Melanie Dr		
	Tallahassee FL		
ARTICLE VII	INCORPORATOR		•
	ddress of the Incorporator is:		
Name:	Emily Richeson		
Address:	2115 Melanie Dr	····	•
	Tallahassee, FL 32304		
	med as registered agent to accept service of p		
certificate, I am	familiar with and accept the appointment as regi	istered agent and agree to	act in this capacity
Imil	11 Micholan		3/16/12
7 1119	<u> </u>	.	<u>~/10/13</u>
•	 Required Signature of Registered Ages 	nt	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 \$.817.155, F.S.

Required Signature of Incorporator

2/16/13

Date