

NR40000003978

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

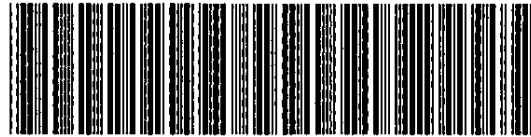
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NR4-2372

MD 4/24

## COVER LETTER

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

SUBJECT: Operation Restore Hope, 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: C. Kevin Crowell

Name (Printed or typed)

749 El Vergel Lane

Address

St. Augustine, FL 32080

City, State & Zip

(904)887-6969

Daytime Telephone number

operationrestorehope@att.net

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

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 11, 2014

C. KEVIN CROWELL  
749 E. VERGEL LANE  
ST.AUGUSTINE, FL 32080

SUBJECT: OPERATION RESTORE HOPE, INC.  
Ref. Number: W14000023172

We have received your document for OPERATION RESTORE HOPE, INC. 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 distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is : OPERATION RESTORING HOPE, INC., document number N11000000138.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.  
<http://www.sunbiz.org/titledef.html>.

Please return the corrected original and one copy of 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.

Maryanne Dickey  
Regulatory Specialist II  
New Filing Section

Letter Number: 914A00007851

## COVER LETTER

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

SUBJECT: **Heroes fighting for Heroes, 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: **Chet Kevin Crowell**

Name (Printed or typed)

**749 El Vergel Lane**

Address

**St. Augustine, Fl. 32080**

City, State & Zip

**904-887-6969**

Daytime Telephone number

**11binstructor@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: Heroes fighting for Heroes, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
749 El Vergel Lane  
St. Augustine, Fl. 32080

Mailing address, if different is:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Wellness and Education for those that have Served.

Heroes fighting for Heroes, Inc. is a Veteran based, higher education driven, outcome specific non-profit organization focused on three key goals: rehabilitation, reconnecting and empowering U.S. Service Members, Gold Star Family Members, Law Enforcement, Firefighters, and First Responders.

Heroes fighting for Heroes, Inc. - Rehabilitates, Reconnects and Empowers Service Members, Law Enforcement, Firefighters and First Responders through wellness and education.

Heroes fighting for Heroes, Inc. will be physically located in St. Johns County, Florida.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: Elected by votes

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

Name and Title: Lisa M. Crowell/ President

Name and Title: \_\_\_\_\_

Address 749 El Vergel Lane  
St. Augustine, Fl. 32080

Address: \_\_\_\_\_

Name and Title: Kenneth F. Peck/ Treasurer

Name and Title: \_\_\_\_\_

Address 7033 Cultivation Way  
Winter Garden, Fl. 34787

Address: \_\_\_\_\_

Name and Title: C. Kevin Crowell/ DIRECTOR

Name and Title: \_\_\_\_\_

Address 749 El Vergel Lane  
St. Augustine, Fl. 32080

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Lisa M. Crowell

Address: 749 El Vergel Lane

St. Augustine, Fl. 32080

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

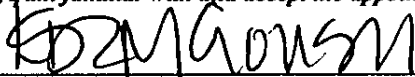
Name: C. Kevin Crowell

Address: 749 El Vergel Lane

St. Augustine, Fl. 32080

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TALLAHASSEE, FLORIDA

*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

20 April 2014

\_\_\_\_\_  
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

20 April 2014

\_\_\_\_\_  
Date