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COVER LETTER

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

SUBJECT: The Family Bond, Incorporated
(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: Broke Bond
Name (Printed or typed)

PO Box 112211
Address

Naples, FL 34108
City, State & Zip

239. 825. 4003
Daytime Telephone number

naplesvisits@gmail.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 617.0202, F.S., (Not for Profit)

For

The Family Bond, Incorporated A Florida Non-Profit Corporation

I, the undersigned natural person of the age of eighteen (18) years or more, acting as incorporator of a corporation under the Florida Not for Profit Corporation Act, do hereby adopt the following Articles of Incorporation for such corporation:

ARTICLE I NAME

The name of the corporation is THE FAMILY BOND, INCORPORATED, (the corporation)

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address is:

Street Address:

Brooke Bond
2650 Fountain View Circle, #101
Naples, FL 34109

Mailing Address:

Brooke Bond
PO Box 112211
Naples, FL 34108

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RECEIVED
FAMILY BOND, INC.

ARTICLE III PURPOSE

The Corporation is formed exclusively for charitable purposes with the meaning of Section 501©3 of the Internal Revenue Code of 1986 (the "Code") and to do all things necessary for an incidental to the accomplishment of the purpose and goals for the Corporation.

Notwithstanding the provisions of this Article 3, the Corporation shall neither have nor exercise any power, nor shall it engage directly or indirectly in any activity, that would invalidate it status (1) as a corporation which is exempt from federal income taxation as an organization described in Section 501©3 of the Code or (2) as a corporation contributions to which are deductible under Section 170© (2), 2055 (a), and 2522 (a) of the Code.

DISSOLUTION

Upon dissolution of this corporation/organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501©3 of the Internal Code, or corresponding section of any future Federal tax code, shall be distributed to the Federal government or to a state or local government for a public purpose. Any such assets not so disposed of by a Court of competent jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said court shall determine which are organized and operated for such purposes.

ARTICLE IV MANNER OF ELECTIONS

The number of directors and the method of their election shall be determined by the Bylaws of the Corporation and shall be subject to change from time to time as the Bylaws may be amended. The Corporation will have no members and the management to the Corporation is vested in the Board of Directors. The number of directors constituting the initial Board of Directors of the Corporation is

two (2).

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

The names, addresses and specific titles of the persons who are to serve as the initial directors are:

Jeff Louissaint, President/Co-Founder
2901 Xelda Ave South
Lehigh Acres, FL 33976

Brooke Bond, Vice-President/Co-Founder
2650 Fountain View Cir #101
Naples, FL 34109

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The **name and Florida street address** of the registered agent is:

Brooke Bond
2650 Fountain View Cir #101
Naples, FL 34109

ARTICLE VII INCORPORATOR

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

Brooke Bond
2650 Fountain View Cir #101
Naples, FL 34109

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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.

Brooke Bond

Signature/Registered Agent

10/20/14

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.

Brooke Bond

Signature/Incorporator

10/20/14

Date