

N160000000250

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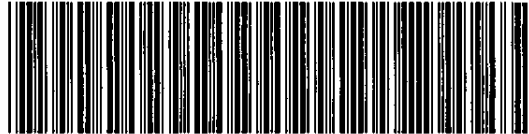
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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3

COVER LETTER

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

SUBJECT: FOREARMED, 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. RENAE GRIGGS
Name (Printed or typed)

5035 WC 48
Address

BUSHNELL, FL 33513
City, State & Zip

(352) 446-5799
Daytime Telephone number

Forearmedinc@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, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Forearmed, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

5035 W C 48 Bushnell, FL 33513

Mailing address, if different is

same as street address

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: exclusively for charitable, religious, educational, and prevention of cruelty to animals 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: is specified in the bylaws of the corporation.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: C. Renae Griggs, President

Address: 5035 W C 48 Bushnell, FL 33513

Name and Title: Carol A. Stutte, Secretary/Treasurer

Address: 216 Depot Street Vonore, TN 37885

Name and Title: Carla Shulman, Vice President

Address: 603 Fiorella Ct. Debary, FL 32713

Name and Title: _____

Address: _____

ARTICLE VI LIMITATIONS

No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in ARTICLE III hereof.

No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office.

Notwithstanding any other provision of these articles, this corporation shall not, except to an insubstantial degree, engage in any activities or exercise any powers that are not in furtherance of the purposes of this corporation.

ARTICLE VII DISSOLUTION CLAUSE

Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

ARTICLE VIII REGISTERED AGENT

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

Name: C. Renae Griggs

Address: 5035 W C 48

Bushnell, FL 33513

ARTICLE IX INCORPORATOR

The name and address of the Incorporator is:

Name: C. Renae Griggs

Address: 5035 W C 48

Bushnell, FL 33513

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STATE DEPARTMENT OF STATE

ARTICLE X EFFECTIVE DATE:

Effective date, if other than the date of filing: January 1, 2016. (OPTIONAL)

If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

C. Renae Griggs
Required Signature of Registered Agent

12/24/15
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.

C. Renae Griggs
Required Signature of Incorporator

12/24/15
Date

Witnessed By:

Carla Shalman
Signature

12/24/15
Date

CARLA Shalman
Print Name

Vice President
Title