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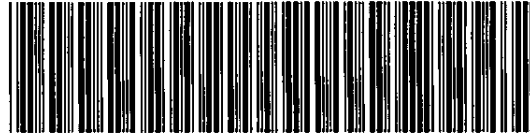
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 FEB -2 PM 2:11

APPROVED
AND
FILED

1/11

COVER LETTER

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

SUBJECT: **S.A.F. HEALTH, 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: **EVELYN DESTIN-UDUEHI**

Name (Printed or typed)

4042 NW 19TH STREET F310

Address

LAUDERHILL, FL 33313

City, State & Zip

954-815-3482

Daytime Telephone number

JOSETT.DESTIN@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: **S.A.F. HEALTH, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4042 NW 19TH STREET F310
LAUDERHILL, FL 33313

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

S.A.F. HEALTH, INC. IS COMMITTED TO PROVIDING A PLATFORM FOR A QUICK RESPONSE TO SAVING LIVES THROUGH EDUCATIONAL DEVELOPMENT AND TREATMENT OPPORTUNITIES.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

THE DIRECTOR SHALL BE ELECTED BY MAJORITY VOTE.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____
Address: EVELYN DESTIN-UDUEHI/CEO-P
4042 NW 19TH STREET F310
LAUDERHILL, FL 33313

Name and Title: DR. JOSETTA WASHINGTON/VP
Address: 6703 NW 39TH LANE
FORT LAUDERDALE, FL 33319

Name and Title: DR. DAVID HODGE/C
Address: 20642 NW 10TH AVENUE
MIAMI GARDENS, FL 33054

Name and Title: JOANN GUYTON/S
Address: 3321 NW 188TH STREET
MIAMI GARDENS, FL 33056

Name and Title: DR. LASHINDA MOORE/T-VC
Address: 2935 NW 164TH STREET
MIAMI GARDENS, FL 33054

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: EVELYN DESTIN-UDUEHI
Address: 4042 NW 19TH STREET F310
LAUDERHILL, FL 33313

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: EVELYN DESTIN-UDUEHI
Address: 4042 NW 19TH STREET F310
LAUDERHILL, FL 33313

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

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

Date

APPROVED
AND
FILED
16 FEB -2 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article __VIII__.

Said corporation is organized exclusively for charitable, religious, educational, and scientific 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 _IX_____.

Upon dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of the section 501 (c) (3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for public purpose. Any such assets not so disposed of shall be 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 exclusively for such purposes.

In witness whereof, we have hereunto subscribed our names this __1____ day of _____ JANUARY _____, __2016.