

N1600000 3122

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H16000074434 3)))



H16000074434ABC\$

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : VCORP SERVICES, LLC  
Account Number : I20080000067  
Phone : (845) 425-0077  
Fax Number : (845) 818-3588

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: statenotices@vcorpservices.com

FILED  
16 MAR 24 PM 12:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
16 MAR 24 PM 1:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION  
SAVE OUR GRID, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

VH

FILED

16 MAR 24 PM 12:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION  
OF  
SAVE OUR GRID, INC.**

The undersigned, desiring to form a nonprofit corporation under Chapter 617 of the Florida Statutes, hereby certifies:

**ARTICLE I  
Name**

The name of the corporation shall be: Save Our Grid, Inc.

**ARTICLE II  
Principal Office**

The principal place of business and street address of the corporation is 37 North Orange Avenue, Suite 500, Orlando, Florida 32801.

**ARTICLE III  
Purpose**

The Corporation is organized and shall be administered and operated exclusively for the promotion of social welfare within the meaning of Section 501(c)(4) of the Internal Revenue Code of 1986. The specific purposes of the Corporation are to engage in education and advocacy with respect to security of the U.S. power grid.

**ARTICLE IV  
Board of Directors**

The affairs of the Corporation shall be managed by a Board of Directors. The Board of Directors shall be elected or appointed as provided in the Corporation's Bylaws.

**ARTICLE V  
Registered Agent and Office**

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

Vcorp Services, LLC  
5011 South State Rd 7  
Davie, FL 33314

**ARTICLE VI  
Duration**

The duration of the Corporation shall be perpetual.

**ARTICLE VII**  
**Section 501(c)(4) Status**

No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to any director or officer of the Corporation, or any other private person, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered to or for the Corporation and to make payments and distributions in furtherance of the purposes set forth in Article III hereof.

Notwithstanding any other provisions of these Articles of Incorporation, the Corporation shall not directly or indirectly carry on any activity which would prevent it from obtaining exemption from Federal income taxation as a corporation described in § 501(c)(4) of the Code, or cause it to lose such exempt status.

In the event of dissolution or final liquidation of the Corporation, all of the remaining assets and property of the Corporation shall, after paying or making provision for the payment of all of the liabilities and obligations of the Corporation and for necessary expenses thereof, be distributed to such organization or organizations as shall at the time qualify under Section 501(c)(3) or Section 501(c)(4) of the Code or corresponding section of any future Code. In no event shall any of such assets or property be distributed to any director or officer, or any private individual.

**ARTICLE VIII**  
**Incorporator**

The name and address of the incorporator is:

Lorraine Smith  
25 Robert Pitt Drive Suite 204  
Monsey, NY 10952

FILED

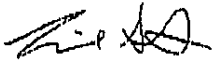
16 MAR 24 PM 12:08

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.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Signature of Registered Agent

Date



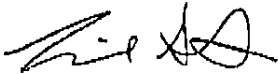
3/24/2016

Signature of Registered Agent

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.

Signature of Incorporator

Date



3/24/2016

Signature of Incorporator