

N 16000004808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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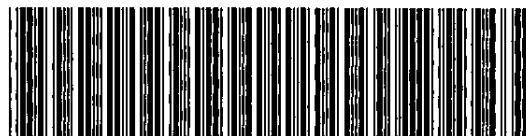
(Business Entity Name)

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MAY 12 2016  
S. GILBERT

FILED  
16 MAY -5 PM 12:23  
U.S. DISTRICT COURT  
DISTRICT OF COLUMBIA

## COVER LETTER

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

**SUBJECT:** Homeless Essentials Love Project, 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: Frank J. Morelli  
\_\_\_\_\_  
Name (Printed or typed)

10190 Belladrum  
\_\_\_\_\_  
Address

Alpharetta, GA 30022  
\_\_\_\_\_  
City, State & Zip

908-295-9876  
\_\_\_\_\_  
Daytime Telephone number

fjmor@comcast.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: Homeless Essentials Love Project, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
3030 N. Rocky Point Dr. STE 150A  
Tampa, FL 33607

Mailing address, if different is: STATE  
FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Provide essentials to those below the poverty level to alleviate  
short term needs of men and women of every race, color, and creed. Our objective is to build stronger communities  
neighborhoods, and lives. We believe that outreach and engagement as well a access to resources and information are  
critical aspects of this work.

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

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

Name and Title:	<u>Gertrude Karabas</u>	Name and Title:	<u>Linda Binncy</u>
Address	<u>1464 Via Porta</u>	Address:	<u>4461 N. Federal Hwy #309</u>
	<u>Delray Beach, FL 33446</u>		<u>Pompano Beach, FL 33064</u>
<hr/>			
Name and Title:	<u>Derek Numm</u>	Name and Title:	<u>Robbie Ames Donaldson</u>
Address	<u>5550 W. Atlantic Ave. Apt 101</u>	Address:	<u>157 Waterford G.</u>
	<u>Delray Beach, FL 33484</u>		<u>Delray Beach, FL 33446</u>
<hr/>			
Name and Title:	<u>John Horne</u>	Name and Title:	<u></u>
Address	<u>399 W. Camino Real Apt 3</u>	Address:	<u></u>
	<u>Boca Raton, FL 33432</u>		<u></u>
<hr/>			

## **ADDITIONAL COVENANTS AND PROMISES**

**FIRST:** 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.

**SECOND:** The names and addresses of the persons who are the initial trustees are named herein as **OFFICERS/DIRECTORS**.

**THIRD:** 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 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."

**FOURTH:** Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of 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 a 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.

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: Registered Agents, Inc.

Address: 3030 N. Rocky Point Dr. STE 150A

Tampa, FL 33607

**ARTICLE VII. INCORPORATOR**

The name and address of the Incorporator is:

Name: Frank J. Morelli, Esq.

Address: 100 SE 5th Avenue PH-11

Boca Raton, FL 33432

**ARTICLE VIII. EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (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*

  
\_\_\_\_\_  
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