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\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

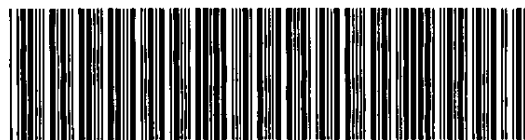
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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*h* 09/20/16

## COVER LETTER

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

SUBJECT: Transition To Freedom, 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: Rebecca Dunn  
Name (Printed or typed)

2152 Reservation Rd.  
Address

Gulf Breeze, FL 32563  
City, State & Zip

850-324-9624  
Daytime Telephone number

msbeckydunn@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: Transition to Freedom, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

2152 Reservation Rd  
Gulf Breeze, FL 32563

Mailing address, if different is:

N/A

**ARTICLE III a. PURPOSE**

The purpose for which the corporation is organized is: assisting members of the community in Escambia County in transitioning from homelessness or destitution to independence and freedom through financial assistance, counseling, community involvement, and introduction to biblical principles.

Article III b. 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 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(s), as said Court shall determine, which are organized and operated exclusively for such purposes.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: This will occur during a meeting of the officers by majority vote, to be re-approved on an annual basis.

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

Name and Title: <u>Rebecca Dunn, <sup>Care</sup>Coordinator</u>	Name and Title: <u>Brent Wadga, <sup>Finance</sup>Coordinator, <sup>Board Member</sup>Director</u>
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Address: <u>2152 Reservation Rd</u> <u>Gulf Breeze, FL 32563</u>	Address: <u>648 Woodbine Dr.</u> <u>Pensacola, FL 32503</u>
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Name and Title: <u>Susie Gragg, <sup>Board Member</sup>Director</u>	Name and Title: <u>Jeff Laugesen, <sup>Board Member</sup>Director</u>
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Address: <u>30 Milton Rd</u> <u>Pensacola FL 32507</u>	Address: <u>38 Faison St</u> <u>Pensacola, FL 32505</u>
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Name and Title: _____	Name and Title: _____
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Address: _____	Address: _____
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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: Rebecca Dunn

Address: 2152 Reservation Rd

Gulf Breeze, FL 32563

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Rebecca Dunn

Address: 2152 Reservation Rd

Gulf Breeze, FL 32563

**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*

Rebecca E. Dunn

Required Signature of Registered Agent Rebecca Dunn

9-6-16

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.*

Rebecca E. Dunn

Required Signature of Incorporator Rebecca Dunn

9-6-16

Date

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