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Certified Copies	Certificates	s of Status
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SECTION TO STATE

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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 20, 2016

SHANE NORTHROP, CPA 13700 SIX MILE CYPRESS PKWY #2 FORT MYERS, FL 33912

SUBJECT: HOOPS ON MISSION, INC.

Ref. Number: W16000064784

We have received your document for HOOPS ON MISSION, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L15000141744.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Matthew T Moon Regulatory Specialist II

Letter Number: 616A00020091

COVER LETTER

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

SUBJECT:	HOOPS ON MI (PROPOSED CORP	ISSIAN, TAC ORATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)		
	•				
Enclosed is an original a	and one (1) copy of the Ar	ticles of Incorporation and	a check for:	I	
\$70.00	⊠ (\$78.75	□\$78.75	\$87.50		
Filing Fee	Filing Fee & Certificate of	Filing Fee & Certified Copy	Filing Fee, Certified Copy		
	Status	& Certified Copy	& Certificate		
		ADDITIONAL COPY REQUIRE			
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	15700 SIX	MILE CYPRESS Address	FAMY		
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	E-mail address: (to be used for	Hron Financia, r future fannual report notification	_, <i>COM</i> on)	02	E SE

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

<u>ARTICLE I NAME</u>

The name of the corporation shall be: Hoops On Mission, Inc.

ARTICLE II PRINCIPAL OFFICE

HOOPS ON MISSION I, INC

Principal street and mailing address is:

4127 Residence Dr Apt 407 Fort Myers, FL 33901

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

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.

Upon the dissolution of the corporation, after paying or making provisions for the payment of all the legal liabilities 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.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

As provided for in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alex Paulec, President Address: 2670 Blue Cypress Lake Ct Cape Coral, FL 33909

Name and Title: Karyna Beltran Jackson, Vice President

Address: 4127 Residence Dr Apt 407 Fort Myers, FL 33901 SELL PRY OF SIME
[KU1] - REVERSE SIME
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Name and Title: Jeff Wheeler, Treasurer

Address: 1145 Del Rio Dr

Fort Myers, FL 33901

Name and Title: Heidi Paulec, Secretary Address: 2670 Blue Cypress Lake Ct Cape Coral, FL 33909

Name and Title: Brian Culbertson, Director

Address: 18180 N Olga Dr Alva, FL 33920

Name and Title: Bill White, Director

Address: 10011 Isola Way

Miromar Lakes, FL 33913

ARTICLE VI REGISTERED AGENT

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

Name: Northrop Financial Group, LLC

Address: 13700 Six Mile Cypress Pkwy.

Suite 2

Fort Myers, FL 33912

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Name: Shane Northrop, CPA

Address: 13700 Six Mile Cypress Pkwy.

Suite 2

Fort Myers, FL 33912

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

09/12/2016

Date

AC OCT O DIX IN DR

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 Incorporate