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MALLASSE FIRM

2 06/08/17

COVER LETTER

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

	rst Responders Inc.				
UBJECT:(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
Enclosed is an original a	and one (1) copy of the Artic	eles 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 CO		PY REQUIRED		
FROM:	Brynne Rorke{Yippiekiyay Nonprofit Solutions				
PROM.	Name (Prin	-			
	6295 Greenwood Plaza				
	Ad	-			
	Greenwood Village, CO				
	City, State & Zip		-		
	303-747-4793				
	Daytime Telephone number				
	brynne@heroes.do				

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

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATIONIn compliance with Chapter 617, F.S., (Not for Profit)

The name of the	NAME · Future First he corporation shall be:	Responders In	- ·		
<u>ARTICLE II</u>	PRINCIPAL OFFICE				
Principal <u>street</u> address: 6340 144th Ave N			Mailing address, if different is: PO Box 17032		
Cle	arwater, FL 33760	(Clearwater, FL 33762	2	
he purpose f	TI PURPOSE Or which the corporation is organized i	s:	ncome teens access	rural medical training	
courses in	Alaska. Additionally, please s	see attached.			
				<u>್ </u>	
ARTICLE		OR DIRECTORS			
ame and Tit	Margaret Parker le: 6340 144th Ave N	Name and T	itle:		
ddress	Clearwater, FL 33760	Address:			
	Secretary				
Name and Title	Betty Rodriguez le: 6340 144th Ave N	Name and T	itle:		
		Address:			
	Treasurer		-		
Name and Title		Name and T	tle:		
ddress	6340 144th Ave N	Address:			
	Clearwater, FL 33760 President				

Required Signature of Incorporator		rporator	Date	
Amber R			May 23, 20	17
to the Department	ment and affirm that the facts stated her t of State constitutes a third degree felony			ed in a document
Required Signature of Registered Agent			Date	
Amber R Petrie			May 23, 2017	
certificate, I am fo	ned as registered agent to accept service amiliar with and accept the appointment of	of process for the above stated as registered agent and agree to a	corporation at the place d act in this capacity	lesignated in this
	Clearwater, FL 33760			
Address:	6340 144th Ave N			
Name:	Amber Petrie		X	ష
The name and ad	dress of the Incorporator is:		202	<u>ب</u> ع
ARTICLE VII	INCORPORATOR			-11.
	Clearwater, FL 33760			
Address:	6340 144th Ave N			9- NNC ;
Name:			The state of the s	*
The name and Flo	orida street address (P.O. Box NOT acce Amber Petrie	eptable) of the registered agent is:		
ARTICLE VI	REGISTERED AGENT			
_				
_				
Address		Address:		
Name and Title:_		Name and Title:		
Address				
Name and Title:_		Name and Title:		

Purpose and Dissolution Clause as required by IRS:

Purpose Clause:

"This organization is organized exclusively for charitable, educational, religious and/or scientific purposes under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, and shall not inure benefit or earnings to any private shareholder or individual.

Dissolution Clause:

"Upon the winding up and dissolution of this organization, after paying or adequately providing for the debts and obligations of the organization, the remaining assets shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, including to another tax-exempt organization under Section 501(c)(3), or shall be distributed to the federal government, or to a state or local government, for a public purpose."