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| (Re | equestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
| (Bu | usiness Entity Nan | ne) |
| | | |
| (Do | ocument Number) | - |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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D O'KEEFE
JUL 2 6 2017



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 11, 2017

LEGAL FILINGS INC. 16830 VENTURA BLVD., STE. 360 ENCINO, CA 91436

SUBJECT: SAFE FOUNDATIONS, INC.

Ref. Number: W17000057293

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

There is a fee of \$78.75 due.

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.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 417A00014004



Encino CA 91436 Phone: 818-380-1940 Fax: 818-3801-950

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

**resubmission

Enclosed please find two copies of the Articles of Non-Profit Incorporation for **Safe Foundations**, Inc.

Also, enclosed is a check made out to Florida Dept of State for the amount of \$78.75.

Please send the stamped articles back to this address:

Legal Filings Inc. 16830 Ventura Blvd, Suite #360 Encino, CA 91436

Sincerely,

Nikki Steen Customer Services

COVER LETTER

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

| SUBJECT: Safe Founda | tions, Inc. | | |
|---------------------------|----------------------------|-----------------------------|------------------------------|
| 30b0EC1 | (PROPOSED CORP | 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 : |
| \$70.00 | \$78.75 | \$78.75 | \$87.50 |
| Filing Fee | Filing Fee & | Filing Fee | Filing Fee, |
| | Certificate of Status | & Certified Copy | Certified Copy & Certificate |
| | Status | | & Certificate |
| | | ADDITIONAL CO | PY REQUIRED |
| | | | |
| | I I Pour I | | |
| FROM: | Legal Filings, Inc. | | _ |
| | Na | me (Printed or typed) | |
| | 16830 Ventura Blvd., Suite | 360 | |
| | | Address | - |
| | Encino, CA 91436 | | |
| | | City, State & Zip | _ |
| | 818-380-1940 | | |
| | Dayt | ime Telephone number | _ |
| | briansand2003@yahoo.com | | |

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

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

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

| 4000 1 | <u>PRINCIPAL OFFICE</u> | | | |
|--|---|---|--|--------------|
| 4069 A | Principal <u>street</u> address: tlantic Blvd. | | Mailing address, if different is: | |
| Jackson | wille, FL 32207 | | | |
| RTICLE III The purpose for v | PURPOSE which the corporation is organized is: | ee attached | · . | |
| | | | - | |
| | | | : | <u>.</u> ; |
| | | | | |
| | | | | ed in by-la |
| | INITIAL OFFICERS AND/OR DIRECT | | Michael Colomuse / Trace / Director | _ |
| Vame and Title:_ | INITIAL OFFICERS AND/OR DIRECT Rita Clevenger / President / Director 1648 Crescent St. | Name and Title | :: Michael Colarusso / Treas / Director 5429 Lannie Rd. | _ |
| ame and Title:_4.ddress | Rita Clevenger / President / Director | | <u> </u> | |
| ame and Title:_ddress | Rita Clevenger / President / Director | Name and Title Address: | 5429 Lannie Rd. | - - |
| Name and Title: Address J Vame and Title: | Rita Clevenger / President / Director 1648 Crescent St. Jacksonville, FL 32205 Brian Sanders / Secretary / Director 1648 Crescent St. | Name and Title Address: | 5429 Lannie Rd. Jacksonville, FL 32218 | - - |
| Vame and Title: Address J Jame and Title: Address 4 | Rita Clevenger / President / Director 1648 Crescent St. Jacksonville, FL 32205 Brian Sanders / Secretary / Director 1648 Crescent St. | Name and Title Address: Name and Title | 5429 Lannie Rd. Jacksonville, FL 32218 | - - |
| Name and Title: Address J Name and Title: Address J Address J | Rita Clevenger / President / Director 1648 Crescent St. Jacksonville, FL 32205 Brian Sanders / Secretary / Director 1648 Crescent St. | Name and Title Address: Name and Title Address: | 5429 Lannie Rd. Jacksonville, FL 32218 | |

| Address | | | |
|--|--|--|---|
| _ | | | |
| - | | | |
| Name and Title:_ | | Name and Title: | |
| Address _ | | Address: | |
| _ | | | |
| Name: Address: | Brian Sanders 4069 Atlantic Blvd. Jacksonville, FL 32207 | T acceptable) of the registered agent is: | |
| | INCORPORATOR Iddress of the Incorporator is: | ······································ | |
| Name: | Brian Sanders | | f - |
| Address: | 4069 Atlantic Blvd. Jacksonville, FL 32207 | | |
| ARTICLE VIII Effective date, if (If an effective dafter the filing.) | EFFECTIVE DATE: other than the date of filing: date is listed, the date must be spec | . (OPTION: | AL) iness days prior or 90 busines: |
| | e inserted in this block does not meet tive date on the Department of State | the applicable statutory filing requirements's records. | ents, this date will not be listed |
| Having been nate certificate, I am | med as registered agent to accept s familiar with and accept the appoint Required Signature of Reg | ervice of process for the above stated coment as registered agent and agree to act | orporation at the place designate in this capacity C |
| | | | |

Safe Foundations, Inc.

ARTICLE III

Section 1:

This corporation is organized and operated exclusively for one or more of the following purposes: Charitable, Educational, Scientific and/or Religious. This includes the making of distributions to organizations that qualify as exempt organizations under section 501 (c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code. The specific purpose is to provide support as needed to maintain independence for the elderly or disabled, as well as any other populations with a barrier to independent living. The organization also aims to become a payee representative through Social Security Administration for those individuals in need of financial guidance and assistance.

Section 2:

No part of the net earnings of the organization shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the organization 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 in the purpose clause hereof. No substantial part of the activities of the organization shall be carrying on of propaganda, or otherwise attempting to influence legislation, and the organization shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office. Notwithstanding any other provision of the document, the organization shall not carry on any other activities not permitted to be carried on (a) by an organization exempt from federal income tax under section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or (b) by an organization, contributions to which are deductible under section 170 (c) (2) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Section 3:

Upon the dissolution or winding up of the corporation, its assets remaining after payment, or provision for payment, of all debts and liabilities of this corporation shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for religious, charitable, educational, literary, and scientific purposes and which has established its tax exempt status under Section 501 (c) (3). Internal Revenue Code.