

N17000010874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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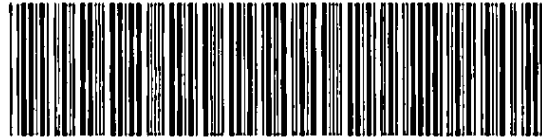
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

Shalom House of Restoration and Rehab Center for All Inc.

SUBJECT: _____
(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: Juliet Akinniranye

Name (Printed or typed)

2712 Old Red Pine Way

Address

Orlando, FL 32825

City, State & Zip

(407) 242-5915

Daytime Telephone number

shalomhouse2012@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

Shalom House of Restoration and Rehab Center for All Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2712 Old Red Pine Way

Mailing address, if different is:

Orlando, FL 32825

ARTICLE III PURPOSE

Our purpose is to provide various programs for men and women seeking
The purpose for which the corporation is organized is:
addiction and physical rehabilitation recovery. Our programs are self-paced and built upon specialized plans designed by the
patient and his or counselor.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Is provided in the articles of incorporation and the bylaws of the corporation.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: President/D- Juliet Akinniranye

Address: 2712 Old Red Pine Way
Orlando, FL 32825

Name and Title: Vice President- Marian Edionwele

Address: 6302 Dover Drive
Suffolk, VA 23435

Name and Title: Secretary- Tayo Adisa

Address: 629 Buckingham Drive
Oviedo, FL 32765

Name and Title: Treasurer-Boyaji Adisa

Address: 629 Buckingham Drive
Oviedo, FL 32765

Name and Title: Executive Director- Marcia David

Address: 1588 Carroll St.
Brooklyn, New York 11213

Name and Title: Director Asst.-Annetta Perry

Address: 1248 Southbeach Circle
Kissimmee, FL 34746

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: Juliet Akinniranye
 Address: 2712 Old Red Pine Way
 Orlando, FL 32825

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Juliet Akinniranye
 Address: 2712 Old Red Pine Way
 Orlando, FL 32825

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 days prior or 90 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

JAKinniranye
 Required Signature of Registered Agent

10/24/17
 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.

JAKinniranye
 Required Signature of Incorporator

10/24/17
 Date

Additional Article:

**Article IX of Shalom House of Restoration and Rehab Centers for All Inc. of the
Articles of Incorporation**

Article IX

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, 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.