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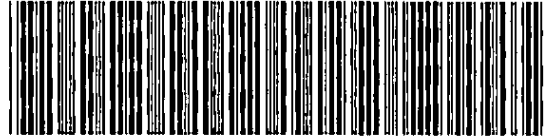
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COVER LETTER

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

SUBJECT: Fleischer Family Foundation 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: Brynne Rorke {Yippiekiyay Nonprofit Solution:
Name (Printed or typed)

6295 Greenwood Plaza Blvd. Ste 100

Address

Greenwood Village, CO 80111

City, State & Zip

303-747-4793

Daytime Telephone number

keith.fleischer@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

Fleischer Family Foundation Inc.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address:
12295 ROCKLEDGE CIR

Mailing address, if different is:

BOCA RATON, FL 33428

ARTICLE III PURPOSE

to assist the people of South Florida during life's most
The purpose for which the corporation is organized is: _____
challenging life transitions such the death of a loved one or moving a loved one to a care facility.

See attached.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: _____

As provided for in bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Keith Fleischer	Name and Title:	
Address	12295 ROCKLEDGE CIR	Address:	
	BOCA RATON, FL 33428		
	President		
Name and Title:	Tunde Ogunlana	Name and Title:	
Address	12295 ROCKLEDGE CIR	Address:	
	BOCA RATON, FL 33428		
	Secretary/Treasurer		
Name and Title:	Caroline Fleischer	Name and Title:	
Address	12295 ROCKLEDGE CIR	Address:	
	BOCA RATON, FL 33428		
	Director		

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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: Keith Fleischer

Address: 12295 ROCKLEDGE CIR

BOCA RATON, FL 33428

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Keith Fleischer

Address: 12295 ROCKLEDGE CIR

BOCA RATON, FL 33428

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

Keith Fleischer

11/28/2017

Required Signature of Registered Agent

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.

Keith Fleischer

11/28/2017

Required Signature of Incorporator

Date

Article VIII:

The effective date for the articles of incorporation shall be **01/01/2018**

Attachment:

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.

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