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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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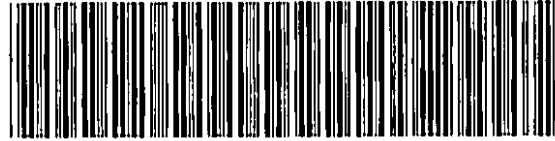
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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2018 FEB 23 PM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Reasonable Policies, 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: William Earle Klay

Name (Printed or typed)

3222 Independence CT.

Address

Tallahassee, Florida 32312

City, State & Zip

850-385-7806

Daytime Telephone number

klayken@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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Reasonable Policies, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address is: Same

204 Lexington Drive
Tallahassee, Florida 32312

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation is organized exclusively to serve as a social welfare organization for scientific and educational purposes within the meaning of § 501(c)(4) of the Internal Revenue Code, as may be amended. Recognizing that the Age of Reason gave rise to the basic tenets of our democracy, the corporation will seek to educate citizens about ways to promote the general welfare that are grounded in empirical research and critical reasoning.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

The directors of the Corporation shall be elected in accordance with methods and qualifications specified in the bylaws of the Corporation. In no event, shall the number of directors be fewer than three.

ARTICLE V POWERS

This corporation shall have and exercise all rights and powers conferred on nonprofit public benefit corporations under the laws of the State of Florida, including the powers to contract, rent, buy, or sell personal or real property.

Notwithstanding any other provision of these Articles of Incorporation, the directors of this corporation shall not engage, participate, or intervene in any activity or transaction that is not permitted to be carried on by a corporation exempt from federal income tax under Section 501(c)(4) of the Code or the corresponding provisions of any future United States Internal Revenue law.

ARTICLE VI INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William Earle Klay, Chairman

Address: 3222 Independence Court, Tallahassee, Florida 32312

Name and Title: Kenneth Earle Klay, President

Address: 204 Lexington Drive, Tallahassee, Florida 32312

Name and Title: Irene N. Klay, Secretary and Treasurer

Address: 3222 Independence Court, Tallahassee, Florida 32312

ARTICLE VII DISSOLUTION

Upon dissolution and upon payment or adequate discharge of all liabilities and obligations, the assets of the Corporation shall be distributed for one or more exempt purposes within the meaning of § 501(c)(4) or (c)(3) of the Internal Revenue Code, as amended, or shall be distributed to a State or the Federal government for a public purpose.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Name: Kenneth Earle Klay

Address: 204 Lexington Drive, Tallahassee, Florida 32312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William Earle Klay

Address: 3222 Independence Court, Tallahassee, Florida 32312

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

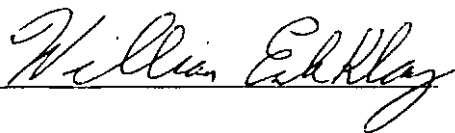


Date

2/23/18

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 Incorporator



Date

February 23, 2018