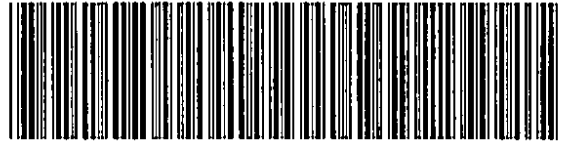


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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**CAMPAIGN FOR PRISON REFORM, INC.
ARTICLES OF INCORPORATION**

Article I – Name

The name of the not for profit corporation shall be: **CAMPAIGN FOR PRISON REFORM, INC.** (hereinafter referred to as the corporation).

Article II – Principal Office

The principal place of business of the corporation shall be:
2048 Ponce De Leon Ave.
West Palm Beach, FL 33407

The mailing address of the corporation shall be:
P.O. Box 211174
West Palm Beach, FL 33421

Article III – Purpose

The corporation is a social welfare organization not organized for profit. The corporate shall operate exclusively for the promotion of social welfare. The corporations primarily engaged in promoting the common good and general welfare of incarcerated individuals including people in prisons, jails, juvenile detention facilities, reentry centers, immigration customs enforcement detention centers, formerly incarcerated individuals and those affected by incarceration.

The corporation shall be permitted to further conduct and any other lawful activity under IRScode501(c)(4). The corporation has no capital stock and will not issue stock. No earnings will benefit or distribute to directors except to reimburse expenses.

Article IV – Manner of Election

The manner in which the directors are elected and appointed shall be in accordance with the bylaws of the corporation.

Article V – Initial Directors

There shall be a minimum of three (3) directors of the corporation at all times. Each director shall have one (1) vote. The number of directors may be increased or decreased from time to time in accordance with the bylaws of the corporation but shall never be less than three (3). The corporations initial board of director's names and addresses are as follows:

Denise Rock
P.O. Box 211174
West Palm Beach, FL 33421

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Aggy DiTullio
6706 Camden Bay Dr., Apt. 210
Tampa, FL 33635

Jewie Tryon
1201 South East Palm Beach Rd.
Apt. B107
Stuart, FL 34994

18 MAY -1 PM 2:13

WEST PALM BEACH, FLORIDA

Article VI – Registered Agent

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

Denise Rock
2048 Ponce De Leon Ave.
West Palm Beach, FL 33407

Article VII – Incorporator

The name and address of the Incorporator is:

Denise Rock
P.O. Box 211174
West Palm Beach, FL 33421

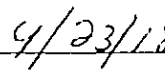
Article VIII – Dissolution Clause

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding seton 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 disposed of shall be disposed of by a court of competent jurisdiction in the county in which the principal office of the organization is then located, exclusively for such purposed or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

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.



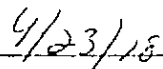
Denise Rock, Registered Agent



Date



Denise Rock, Incorporator



Date



Florida Nonprofit Filing

Filing Information

If an effective date is required for this filing, enter here (MM/DD/YYYY) [What is an effective date?](#)

Required Filing Fees: \$70.00

Certificate of Status \$8.75 (Optional) [What is a certificate of status?](#)

Certified Copy \$8.75 (Optional) [What is a certified copy?](#)

Corporate Name

(Name must include suffix such as "Corporation" or "Corp", "Incorporated" or "Inc". A non-profit entity cannot use "Company" or "Co.")

Manner in which directors are elected:

As provided for in the bylaws.

- OR -

List specific manner of election or appointment of directors in space below.

Principal Place of Business (The principal address must be a street address)

Address

Suite, Apt. #, etc.

City, State

Zip Code & Country

Mailing Address

If your corporate mailing address is the same as the principal address above, please check the box below. Otherwise, enter your corporate mailing address.

Mailing address same as principal address

Address

Suite, Apt. #, etc.

City, State

Zip Code & Country

Name And Address of Registered Agent [What is a registered agent?](#)

Name

Last Name First Name Initial Title (Sr., Jr., etc.)

- OR -

Business to serve as RA: (Must be different from entity name being filed)

Address (PO Box not acceptable)

Suite, Apt. #, etc.

City, State FL

Zip Code & Country US

The Registered Agent must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on the entity's behalf. Do not enter the name of the entity you are attempting to file as Registered Agent. A business entity cannot serve as its own RA.

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s. 831.06, F.S.

Notice of Annual Report

This corporation must file an Annual Report with the Division of Corporations between January 1st and May 1st of every year to maintain "active" status. The corporation's first annual report will be due between January 1st and May 1st of the calendar year following the year the corporation is formed and must be filed online. The fee to file a Corporation Annual Report is \$61.25. Reminder notices to file the Annual Report will be sent to the e-mail address you provide in these articles.

Incorporator Name And Address

Name

Address

Suite, Apt.#, etc.

City, State & Zip Code

Electronic Signature of Incorporator

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I acknowledge that I have read the above "Notice of Annual Report" statement and understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Corporate Purpose

(Maximum of 240 characters.)

characters remaining

Correspondence Name And E-mail Address Why do you need my e-mail address?

Please enter your e-mail address carefully and verify that it is correct. This is the address correspondence pertaining to this filing and future annual report notices will be sent.

Name

E-mail Address

Re-enter E-mail Address

Officer/Director Name And Address

List the name and address of each officer/director now. A non-profit corporation must have 3 directors at all times. This information is required to open most bank accounts and to obtain workers' comp exemption. Once this document is filed, any changes will require an amendment and an additional \$35.00 filing fee.

Title (P, VP, etc...)
Name
Last Name First Name Initial Title (Sr., Jr., etc.)

- OR -

Business Name to serve as Officer

Street Address
City, State
Zip Code & Country

Title (P, VP, etc...)
Name
Last Name First Name Initial Title (Sr., Jr., etc.)

- OR -

Business Name to serve as Officer

Street Address
City, State
Zip Code & Country

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Title (P, VP, etc...)

Name
Last Name First Name Initial Title (Sr., Jr., etc.)

- OR -

Business Name to serve as Officer

Street Address

City, State

Zip Code & Country

Please review the filing for accuracy. If you need to make corrections, do so at this time. The filing information will be added/edited exactly as you have entered it. Once you have submitted the information, your filing cannot be updated, removed, cancelled or refunded.