

N18000006462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

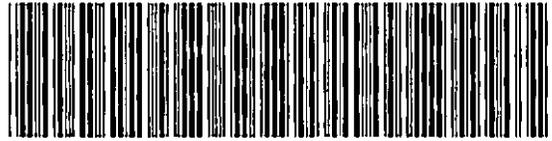
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JUN 13 2018

K. Brumby

COVER LETTER

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

SUBJECT: thePROJECTisLIFE, 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: Dr. T. Hibbert
Name (Printed or typed)

15263 Summer Lake Drive
Address

Delray Beach, FL 33446
City, State & Zip

(305) 812-9111
Daytime Telephone number

tahibbert@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

The name of the corporation shall be: thePROJECTisLIFE, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address: <u>15263 Summer Lake Drive</u> <u>Delray Beach, FL 33446</u>	Mailing address, if different is:
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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: See attached.

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

AS Stated in the Bylaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Dr. T. Hibbert, Psy. D., MCAP, President</u> Address: <u>15263 Summer Lake Drive</u> <u>Delray Beach, FL 33446</u>	Name and Title: <u>Jonetha Curtis, Secretary</u> Address: <u>5170 Willow Pond Rd</u> <u>West Palm Beach, FL 33417</u>
Name and Title: <u>Dr. Alina M. Alonso, MD, Vice Preseident</u> Address: <u>800 Clematis St.</u> <u>West Palm Beach, FL 33401</u>	Name and Title: <u>Jane Cohn, Director</u> Address: <u>P.O. Box 3195</u> <u>Lantana, FL 33465</u>
Name and Title: <u>Andrew Klich, Treasurer</u> Address: <u>20584 NW 14th PL</u> <u>Miami, FL 33169</u>	Name and Title: <u>Arpana Shivdasani, Director</u> Address: <u>10201 Sheila Court</u> <u>Wellington, FL 33465</u>

Name and Title: Nikki Soda, Director Name and Title: _____

Address: _____ Address: _____

Name and Title: Sharon Burns- Carter, Director 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: Elizabeth R. Berkowitz, Esq.
Address: 712 U.S. Highway One, Suite 300-1
North Palm Beach, FL 33408

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dr. T. Hibbert, Psy. D., MCAP
Address: 15263 Summer Lake Dr.
Delray Beach, FL 33446

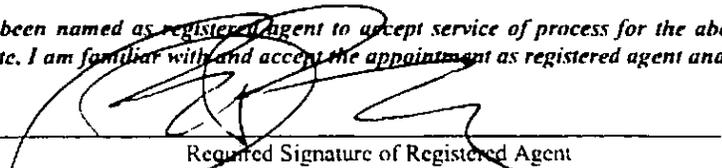
ARTICLE VIII EFFECTIVE DATE:

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.

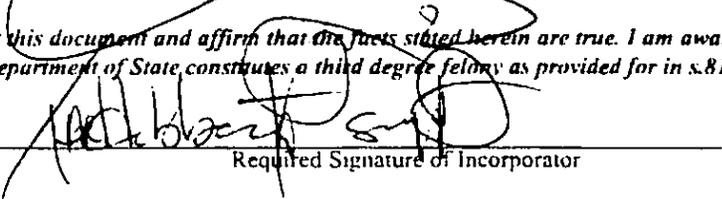
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity:



Required Signature of Registered Agent

5/24/18
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.



Required Signature of Incorporator

5-24-2018
Date

ATTACHED SHEET

ARTICLE III:

1. **PURPOSE CLAUSE:** **thePROJECTisLIFE**, Inc is organized exclusively for charitable, religious, educational and scientific purposes, including for such purpose , 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. The general purpose for which the corporation is organized is to rebuild the lives of those in our substance abuse program through the following:
 - a. Operating a comprehensive clinical and medical program that is designed to empower a person;
 - b. Utilizing evidence-based research and data to provide a curriculum for the education , training and development of people who suffer from addiction and seeking recovery;
 - c. Provide counseling and cognitive behavioral therapy with other holistic forms of treatments to rebuild the patient as a WHOLE person;
 - d. Conduct fundraising events and receive charitable donations in support of training and program development;
 - e. Cultivate relationships with media outlets, local and national sponsors, partners, affiliates and community leaders and the local community for the advancement of substance abuse recovery.

2. **DISSOLUTION CLAUSE:** Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) pf the Internal Revenue Code, or 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.