## N1800000 7756

	(Requestor's Name)			
-	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
PICK-U	P WAIT	MAIL		
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of \$	Status		
Special Instructions to Filing Officer:				

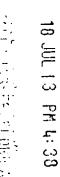
Office Use Only

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## **COVER LETTER**

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

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SUBJECT: Purpose Th	rough Passion Inc		
SUBJECT:	(PROPOSED CORPOR	RATÉ NAME – <u>MUST IN</u>	<u>CLUDE SUFFIX</u> )
Enclosed is an original a	and one (1) copy of the Artic	les 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 CO	PY REQUIRED
FROM:	Amanda Crosby		-
	St. Petersburg, FL 33713		_
	Ci	ty, State & Zip	

772-532-8212

purposethroughpassion727@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

## ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE II	PRINCIPAL OFFICE		
201	Principal <u>street</u> address: 47th Street North	Mailing add	dress, if different is:
St. F	Petersburg, FL 33713		. 101-
	*******	<del></del>	· · · · · · · · · · · · · · · · · · ·
ARTICLE III The numose fi		Please see attached.	
The purpose is	with the corporation is organized in		
	<del></del>		ති. ය ල
<del></del>			
ARTICLE IV	MANNER OF ELECTION The	manner in which the directors are elected ar	nd appointed: Set forth in bylaws.
ARTICLE V	INITIAL OFFICERS AND/OR DI	RECTORS	
ARTICLE V  Name and Tit	INITIAL OFFICERS AND/OR DIA le: 201 47th Street North	RECTORS  Name and Title:	
ARTICLE V	INITIAL OFFICERS AND/OR DIA le: 201 47th Street North	RECTORS  Name and Title:	
ARTICLE V  Name and Tit  Address	INITIAL OFFICERS ANDIOR DIA  le: Amanda Crosby, Director  201 47th Street North  St. Petersburg, FL 33713  Lauren Stover, Officer	Name and Title:   Address:	
ARTICLE V  Name and Tit  Address  Name and Tit	INITIAL OFFICERS ANDIOR DIA  le: Amanda Crosby, Director  201 47th Street North  St. Petersburg, FL 33713  Lauren Stover, Officer	Name and Title:   Address:   Name and Title:   Name and	
ARTICLE V  Name and Tit  Address	INITIAL OFFICERS ANDIOR DIA  le: Amanda Crosby, Director  201 47th Street North  St. Petersburg, FL 33713  Lauren Stover, Officer	Name and Title:   Address:	
ARTICLE V  Name and Tit  Address  Name and Tit  Address	INITIAL OFFICERS AND/OR DIA  Amanda Crosby, Director  201 47th Street North  St. Petersburg, FL 33713  Lauren Stover, Officer  138 Pershing Street NE  St. Petersburg, FL 33703	Name and Title: Address: Name and Title: Address: Address:	
ARTICLE V  Name and Tit  Address  Name and Tit	INITIAL OFFICERS AND/OR DIA  Amanda Crosby, Director  201 47th Street North  St. Petersburg, FL 33713  Lauren Stover, Officer  138 Pershing Street NE  St. Petersburg, FL 33703	Name and Title:   Address:   Name and Title:   Name and	
ARTICLE V  Name and Tit Address  Name and Tit Address	INITIAL OFFICERS AND/OR DIA  le: Amanda Crosby, Director  201 47th Street North  St. Petersburg, FL 33713  Lauren Stover, Officer  138 Pershing Street NE  St. Petersburg, FL 33703  le: Leane Sandbach, Officer	Name and Title: Address: Name and Title: Address: Name and Title: Name and Title:	

Name and Title:		Name and Title:	
Address		Address:	
<del></del>			
Name and Title:		Name and Title:	
Address		Address:	
<del></del>	<del></del>	<del></del>	
	REGISTERED AGENT rida street address (P.O. Box NOT accep	otable) of the registered agent is:	
Name:	Amanda Crosby	말:	<b>⊒</b>
Address:	1201 47th Street N		10 JUL
, redress.	St. Petersburg, FL 337	<u>13</u>	ω
	INCORPORATOR  Iress of the Incorporator is:	13 25 E E E E E E E E E E E E E E E E E E	PM 4: 38
Name:	Amanda Crosby		
Address:	1201 47th Street N		
	St. Petersburg, FL 337	713	
Effective date, if o	EFFECTIVE DATE: other than the date of filing: tte is listed, the date must be specific and	(OPTIONAL) d cannot be more than five days prior or 90 days after	the filing.)
	inserted in this block does not meet the ap ive date on the Department of State's reco	plicable statutory filing requirements, this date will not be rds.	listed as the
		of process for the above stated corporation at the place of sregistered agent and agree to act in this capacity	lesignated in this
Amanda Crashul		7/6/2018	
<del>~ (114.44()</del>	Required Signature of Registered	Agent Date	
	ment and affirm that the facts stated here of State constitutes a third degree felony	in are true. I am aware that any false information submitt as provided for in $s.817.155$ , F.S.	ed in a documen
Amou	ida Crustus	7/6/2018	
1 11 6	Required Signature of Incorp	porator Date	

## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS ATTACHMENT ARTICLE III: PURPOSE

Purpose Throug Passion Corps pursues and funds recovering addicts participating in local recreational activities in an effort to create long term sobreity.

The corporation is organized exclusively for charitable, religious, educational, or scientific purposes under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Upon the dissolution of this 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 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.