

N19000004314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

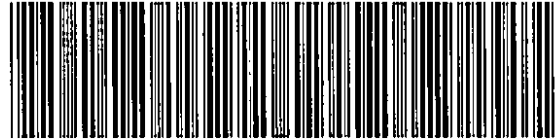
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 APR 15 PM 4:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 25 2019

K Brumbley

COVER LETTER

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

SUBJECT: HOPE4VETERANS, INC.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	<u>\$78.75</u>
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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Lynn Geiser

Name (printed or typed)

224 Palazzo Circle

Address

St. Augustine, FL 32092

City, State & Zip

920-471-2119

Daytime Telephone Number

csflgeiser2016@gmail.com

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

FILED

2019 APR 15 PM 4:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

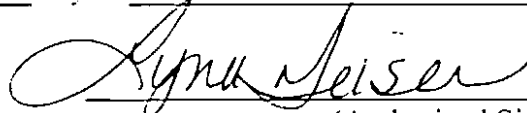
**NOT FOR PROFIT
CERTIFICATE OF DOMESTICATION**

The undersigned, Lynn Geiser, President
(Name) (Title)
of HOPE4VETERANS, INC. a foreign Corporation
(Corporation Name)
in accordance with section 617.1803, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was January 22, 2018.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Wisconsin.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was HOPE4VETERANS, INC.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 617.01201 and 617.0202 with this certificate is HOPE4VETERANS, INC.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was Wisconsin.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 617.1803.

I am President of HOPE4VETERANS, INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 11 day of April, 2019



(Authorized Signature)

Filing Fee:	
Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

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

The name of the corporation shall be:

HOPE4VETERANS, INC.

The principal place of business/ mailing address shall be:

Mailing Address

224 Palazzo Circle

St. Augustine, FL 32092

The purpose for which the corporation is organized:

Hope4Veterans, Inc.'s mission is to empower Military Women (both veterans and spouses of military) through community resources, financial support, education, and encouraging fellowship between military women within the community.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

As Set forth in the Bylaws

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

The name(s) and address(es) and specific title(s):

Title/Name

Lynn Geiser - President

224 Palazzo Circle

St.Augustine, FL 32092

Title/Name

Elizabeth Thomas- Director

4409 Hoffner Ave. #199

Belle Isle, FL 32812

Title/Name

Title/Name

Jim Radey- Treasurer

3530 S County Rd. P

Denmark, WI 54208

Title/Name

Jeremy Geiser- Director

224 Palazzo Circle

St.Augustine, FL 32092

Title/Name

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Lynn Geiser

224 Palazzo Circle

St. Augustine, FL 32092

ARTICLE VII INCORPORATOR


The name and address of the incorporator is:

Lynn Geiser

224 Palazzo Circle

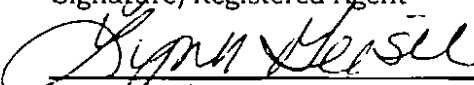
St. Augustine, FL 32092

Having been named as registered agent and 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.



Signature/Registered Agent

04/11/2019
Date



Signature/Incorporator

04/11/2019
Date