

N 20 000 00 4 471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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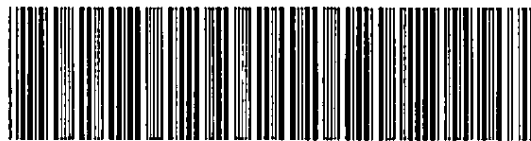
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: Support Managed Board Association 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: Katie Vukich

Name (Printed or typed)

145 Lakeview Dr

Address

Verdi, NV 89439-0993

City, State & Zip

303-306-4669

Daytime Telephone number

office@supportmanagedhoa.com

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

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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: Support Managed Board Association Inc

ARTICLE II PRINCIPAL OFFICE

Principal **street** address:

400 N Ashley Dr Suite 1900, Tampa FL 33602

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: We educate and provide a new modern solution to managing association communities to increase efficiency and transparency while decreasing liability and time spent on managing the communities.

Please see attachment.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Reginald Grigsby - President & Director

Address: 400 N Ashley Dr Suite 1900
Tampa FL 33602

Name and Title: _____

Address: _____

Name and Title: Russell Munz - Treas/Secretary/Director

Address: 400 N Ashley Dr Suite 1900
Tampa FL 33602

Name and Title: _____

Address: _____

Name and Title: Mike Poats - Director

Address: 400 N Ashley Dr Suite 1900
Tampa FL 33602

Name and Title: _____

Address: _____

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TALLAHASSEE, FL

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ 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: Reginald Grigsby
Address: 400 N Ashley Dr Suite 1900
Tampa FL 33602

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Katie Vukich
Address: 145 Lakeview Drive
Verdi, NV 89439-0993

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TALLAHASSEE, FL

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

04/17/2020

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

04/17/2020

Date

Addendum, to Articles of Incorporation

Purpose Clause:

This organization is organized exclusively for charitable, educational, religious and/or scientific purposes under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, and shall not inure benefit or earnings to any private shareholder or individual.

Dissolution Clause:

Upon the winding up and dissolution of this organization, after paying or adequately providing for the debts and obligations of the organization, the remaining assets shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively 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, including to another tax-exempt organization under Section 501(c)(3), or shall be distributed to the federal government, or to a state or local government, for a public purpose.

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