W2000008377

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

Office Use Only



200345575852

06/01/20--01023--012 **78.75

:

Wille Derrick Thompson

COVER LETTER

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

SUBJECT: Curating F	or Him Inc		
	(PROPOSEĎ CORP	ORÂTE NAME – <u>MUST IN</u>	CLUDE SUFFIX)
Enclosed is an original	and one (1) copy of the Ar	ticles 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	Kate Vukich		

lindakoldenhoven@gmail.com

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

PO Box 993

Verdi, NV 89439

303-306-4669

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

Name (Printed or typed)

Address

City, State & Zip

Daytime Telephone number

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

<u>ARTICLE I</u> The name of	<u>NAME</u> (the corporation shall be:	·
	I PRINCIPAL OFFICE	
85	Principal <u>street</u> address: 12 Egret Meadow Lane	Mailing address, if different is:
We	est Palm Beach, Florida 33412	
The purpose cook, eat an	d pray together for a strong marriage and fami	help young couples by providing education and necessary tools to ly. We provide Biblically inspired fashion shows to raise dollars for faith
based organ	izations and we exhibit Biblical art.	
See Attachn	nent.	
		er in which the directors are elected and appointed: ORS
4RTICLE +	/ INITIAL OFFICERS AND/OR DIRECTS	<u>ORS</u>
ARTICLE 1 ARTICLE 1 Name and T	/ INITIAL OFFICERS AND/OR DIRECT	
ARTICLE V	/ INITIAL OFFICERS AND/OR DIRECTOR itle: Linda Koldenhoven President/Director	ORS Name and Title:
A <i>RTICLE V</i> Name and T	itle: Linda Koldenhoven President/Director 8512 Egret Meadow Lane West Palm Beach, Florida 33412	ORS Name and Title: Address:
ARTICLE V Name and T Address	itle: Linda Koldenhoven President/Director 8512 Egret Meadow Lane West Palm Beach, Florida 33412 Kenneth Koldenhoven Sec/Tres/Director	ORS Name and Title: Address:
ARTICLE V Name and T Address	itle: Linda Koldenhoven President/Director 8512 Egret Meadow Lane West Palm Beach, Florida 33412 itle: Kenneth Koldenhoven Sec/Fres/Director	ORS Name and Title: Address:
ARTICLE V Name and T Address Name and T	itle: Linda Koldenhoven President/Director 8512 Egret Meadow Lane West Palm Beach, Florida 33412 Kenneth Koldenhoven Sec/Tres/Director 8512 Egret Meadow Lane West Palm Beach, Florida 33412	ORS Name and Title: Address: Name and Title:
ARTICLE V	itle: Linda Koldenhoven President/Director 8512 Egret Meadow Lane West Palm Beach, Florida 33412 Kenneth Koldenhoven Sec/Tres/Director 8512 Egret Meadow Lane West Palm Beach, Florida 33412	Name and Title: Address: Name and Title: Address:

Name and Title	; <u> </u>	_ Name and Title:	
Address		Address:	
		- 	
Name and Title	;	_ Name and Title:	
Address		_ Address:	
<u>ARTICLE VI</u>	REGISTERED AGENT		
The name and	Florida street address (P.O. Box NOT acco	eptable) of the registered agent	is:
Name:	Linda Koldenhoven		
Address:	8512 Egret Meadow Lar	10	
	West Palm Beach, Florida	33412	
	INCORPORATOR address of the Incorporator is:		
Name:	Kate Vukich		
Address:	PO Box 993		
	Verdi, NV 89439		
ARTICLE VIII Effective date, (If an effective	EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be specific a	. (OPTI .nd cannot be more than five	ONAL) days prior or 90 days after the filing.)
	te inserted in this block does not meet the a ective date on the Department of State's rec		rements, this date will not be listed as the
Having been n	amed as registered agent to accept service a familiar with and accept the appointment	of process for the above state as registered agent and agree t	ed corporation at the place designated in this to act in this capacity
du	2 Kalu-		05/27/2020
	Nequired Signature of Registered	d Agent	Date
	cument and affirm that the facts stated her ent of State constitutes a third degree felony		any false information submitted in a documen F.S.
Ω	(\mathcal{A})		05/27/2020
	Required Signature of Inco	prporator	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.

COVER LETTER

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

SUBJECT:

Curating For Him Inc

PO Box 993

Verdi, NV 89439

303-306-4669

	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)		
Enclosed is an original a	and one (1) copy of the Ar	ticles 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:	Kate Vukich	me (Printed or typed)	-

lindakoldenhoven@gmail.com

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

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

Address

City, State & Zip

Daytime Telephone number