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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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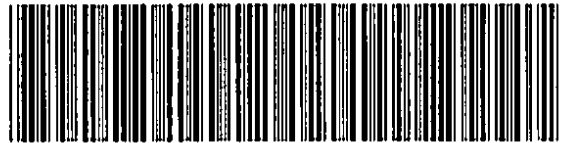
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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21 MAY -3 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D O'KEEFE
MAY 27 2021

COVER LETTER

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

SUBJECT: Stride and Strive, 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: Charles Miller
Name (Printed or typed)

190 Carondelet Plaza, Suite 600
Address

St. Louis, MO 63105
City, State & Zip

314-345-6318
Daytime Telephone number

Charlie.Miller@huschblackwell.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: Stride and Strive, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
378 Northlake Blvd., #244

North Palm Beach, Florida 33408

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Corporation is organized exclusively for charitable, religious, educational and scientific purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code. More specifically, the Corporation is organized to provide educational opportunities for trainees in pediatric orthopaedics and to provide financial support for those in need to obtain medical care for children.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: As provided for in Bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Matthew Dobbs, President

Address: 2700 North Ocean Drive, Unit 1706b
Riviera Beach, Florida 33404

Name and Title: Evelyn Kuong, Vice President

Address: Duchess of Kent Children's Hospital
12 Sandy Bay Road, 3rd Floor
Pokfulam, Hong Kong

Name and Title: Peter Flores, Treasurer

Address: 12202 SW 107 Ct
Miami, Florida 33176

Name and Title: Thomas Dobbs, Secretary

Address: 2700 North Ocean Drive, Unit 1706b
Riviera Beach, Florida 33404

Name and Title: Tatiana Guerschman, Director

Address: Rua das Paineiras, 362 apto 102
CEP 09070 220
Santo André SP, Brazil

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

21 MAY - 3 PM 12:43

FILED

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: Matthew Dobbs

Address: 378 Northlake Blvd., #244

North Palm Beach, Florida 33408

ARTICLE VII INCORPORATOR

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

Name: Charles Miller

Address: 190 Carondelet Plaza, Suite 600

St. Louis, Missouri 63105

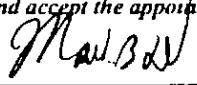
ARTICLE VIII EFFECTIVE DATE:

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

04/19/21
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

4/28/2021
Date

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TALLAHASSEE, FLORIDA