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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

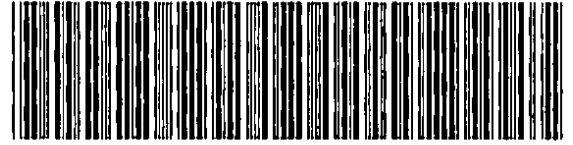
(Business Entity Name)

(Document Number)

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A LIMITED LIABILITY PARTNERSHIP

1883 W. Royal Hunte Dr. Suite 200
Cedar City, Utah 84720
Phone 435-586-9366
Fax 435-586-9491

Janey Gurr, Paralegal
janey.gurr@kkoslawyers.com

December 21, 2021

Department of State
Division of Corporations
The Center of Tallahassee
2415 N. Monroe Street Suite 810
Tallahassee, FL 32303

To Whom It May Concern:

Enclosed for processing are duplicates of the Articles of Incorporation for a Non Profit for **Heroic Adventures, Inc.** Also enclosed is a check in the amount of \$125.00 to cover the filing fee.

If you find the enclosed document acceptable, please note your acknowledgment of receipt on the copy and return it to my office with the enclosed return envelope as noted above.

Thank you for your anticipated attention to this matter.

Very truly yours,

KYLER KOHLER OSTERMILLER & SORENSEN, LLP

Janey Gurr, Paralegal

Enclosure

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

ARTICLE I NAME

The name of the corporation shall be: Heroic Adventures, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address: <u>1883 W. Royal Hunte Drive, Suite 200A</u> <u>Cedar City, UT 84720</u>	Mailing address, if different is: <u></u> <u></u>
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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Corporation is organized exclusively for charitable, educational,
and specific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt
organizations under section 501(c)(3) of the Internal Revenue Code of 1986 ("IRC"), or the corresponding section of
any future federal tax code, and without limiting the foregoing, the corporation is further organized to: support veterans
mental and physical health through recreational fishing excursions.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Michael Ott, President</u> Address: <u>1883 W. Royal Hunte Drive, Suite 200A</u> <u>Cedar City, UT 84720</u>	Name and Title: <u>Liette Black, Treasurer</u> Address: <u>1883 W. Royal Hunte Drive, Suite 200A</u> <u>Cedar City, UT 84720</u>
Name and Title: <u>James Schrader, Secretary</u> Address: <u>1883 W. Royal Hunte Drive, Suite 200A</u> <u>Cedar City, UT 84720</u>	Name and Title: <u></u> Address: <u></u>
Name and Title: <u></u> Address: <u></u>	Name and Title: <u></u> Address: <u></u>

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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: Registered Agent Solutions, Inc.
Address: 155 Office Plaza Drive, Suite A
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA
STATE DEPARTMENT OF REVENUE

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Michael Ott
Address: 1853 W. Royal Hunte Drive, Suite 200A
Cedar City, UT 84720

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

Juan Humpel Required Signature of Registered Agent 12/21/21 Date

I submit this document and affirm that the facts stated herein are true. I am aware that a 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.

Michael Ott Required Signature of Incorporator 12/20/21 Date