

N220000007251

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

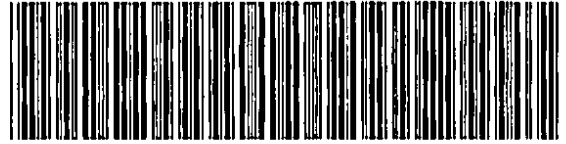
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2022 JUN 10 AM 11:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** Effective Rehabilitation Associates, 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:** Cindy Mejia, Incorporator  
\_\_\_\_\_  
Name (Printed or typed)

2221 E Arapahoe Rd Unit 2715  
\_\_\_\_\_  
Address

Centennial, CO 80161  
\_\_\_\_\_  
City, State & Zip

303-306-4669  
\_\_\_\_\_  
Daytime Telephone number

support@instantnonprofit.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: Effective Rehabilitation Associates, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
1389 Hibiscus Street

Clearwater, FL 33755

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: helping people achieve spiritual and mental rehabilitation and  
renewal with effective counseling. (See Attached)

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**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: Mike Hoy, President

Address: 1389 Hibiscus St

Clearwater, FL 33755

Name and Title: Mike Hoy, Director

Address: 1389 Hibiscus St

Clearwater, FL 33755

Name and Title: Carol Kirtley, Treasurer

Address: 1389 Hibiscus St

Clearwater, FL 33755

Name and Title: Carol Kirtley, Director

Address: 1389 Hibiscus St

Clearwater, FL 33755

Name and Title: Thomas Garcia, Secretary

Address: 1389 Hibiscus St

Clearwater, FL 33755

Name and Title: Thomas Garcia, Director

Address: 1389 Hibiscus St

Clearwater, FL 33755

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: Mike Hoy  
 Address: 1389 Hibiscus Street  
Clearwater, FL 33755

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 TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Mike Hoy  
 Address: 1389 Hibiscus Street  
Clearwater, FL 33755

**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*

*Mike Hoy*

Required Signature of Registered Agent

*5/25/22*

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.*

*Mike Hoy*

Required Signature of Incorporator

*5/25/22*

Date

## **Purpose and Dissolution Clause as required by IRS**

### **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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