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12/02/2022

75

COVER LETTER

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

SUBJECT: Giving Hands That Care, 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)

2022 JUN -2 AM 11:35

ED

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: Giving Hands That Care, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2378 Surfside Blvd Suite A133

Cape Coral, FL 33991

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: We help individuals and families in Cape Coral and the surrounding communities by providing health services so they can experience a life of optimal health. (See Attached)

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: Omar Clark, President

Address: 2378 Surfside Blvd Suite A133
Cape Coral, FL 33991

Name and Title: Omar Clark, Director

Address: 2378 Surfside Blvd Suite A133
Cape Coral, FL33991

Name and Title: Josh Logan, Treasurer

Address: 2378 Surfside Blvd Suite A133
Cape Coral, FL 33991

Name and Title: Kyle Konas, Director

Address: 2378 Surfside Blvd Suite A133
Cape Coral, FL 33991

Name and Title: Eddie Suarez, Secretary

Address: 2378 Surfside Blvd Suite A133
Cape Coral, FL 33991

Name and Title: Josh Logan, Director

Address: 2378 Surfside Blvd Suite A133
Cape Coral, FL 33991

2022 Dec -2 AM 11:35

Name and Title: _____	Name and Title: <u>Eddie Suarez, Director</u>
Address _____	Address: <u>2378 Surfside Blvd Suite A133</u>
_____	<u>Cape Coral, FL 33991</u>
_____	_____
Name and Title: _____	Name and Title: <u>Jina Foltz, Director</u>
Address _____	Address: <u>2378 Surfside Blvd Suite A133</u>
_____	<u>Cape Coral, FL 33991</u>
_____	_____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Omar Clark

Address: 2378 Surfside Blvd Suite A133

Cape Coral, FL 33991

ARTICLE VII INCORPORATOR

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

Name: Omar Clark

Address: 2378 Surfside Blvd A133

Cape Coral, FL 3391

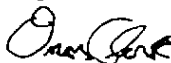
ARTICLE VIII EFFECTIVE DATE:

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

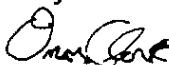


Required Signature of Registered Agent

7/6/22

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.



Required Signature of Incorporator

7/6/22

Date

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FILED

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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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10/10/2022

ED

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Cape Coral, FL 33991

Name and Title: Josh Logan, Director

Address: 2378 Surfside Blvd Suite A133
Cape Coral, FL 33991

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FD

Name and Title: _____	Name and Title: <u>Eddie Suarez, Director</u>
Address _____	Address: <u>2378 Surfside Blvd Suite A133</u>
_____	<u>Cape Coral, FL 33991</u>
_____	_____
Name and Title: _____	Name and Title: <u>Jina Foltz, Director</u>
Address _____	Address: <u>2378 Surfside Blvd Suite A133</u>
_____	<u>Cape Coral, FL 33991</u>
_____	_____

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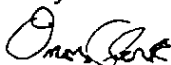


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