

N230000005619

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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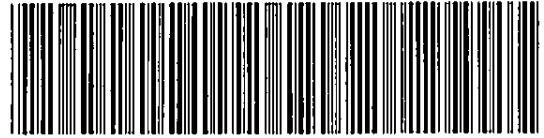
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COVER LETTER

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

SUBJECT: HNA Mental Health Program 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: Legal Filings, Inc.

Name (Printed or typed)

16830 Ventura Blvd., Suite 360

Address

Encino, CA 91436

City, State & Zip

818-380-1940

Daytime Telephone number

june.kiks@gmail.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: HNA Mental Health Program Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2204 Princess Julia Ln.

Lutz, FL 33549

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: See attached

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: As stated in by-laws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: June Aquil / President and Director

Name and Title: _____

Address 2204 Princess Julia Ln.

Address: _____

Lutz, FL 33549

Name and Title: Fiona Kulubya / Treasurer and Director

Name and Title: _____

Address 14935 Dinsdale Dr.

Address: _____

Silver Spring, MD 20906

Name and Title: Nancy Christensen / Secretary and Dir

Name and Title: _____

Address 21880 Fieldthorn Ter.

Address: _____

Broadlands, VA 20148

Name and Title: Juliet Jones / Director Name and Title: _____
Address 8595 College Pkwy., Ste. 350 Address: _____
Fort Myers, FL 33919 _____

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: June Aquil
Address: 2204 Princess Julia Ln.
Lutz, FL 33549

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: June Aquil
Address: 2204 Princess Julia Ln.
Lutz, FL 33549

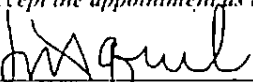
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

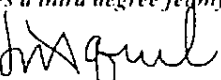
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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:

 4/10/23
Required Signature of Registered Agent 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.

 4/10/23
Required Signature of Incorporator Date

HNA Mental Health Program Inc.

ARTICLE III

Section 1:

This corporation is organized and operated exclusively for one or more of the following purposes: **Charitable, Educational, Scientific and/or Religious**. This includes the making of distributions to organizations that qualify as exempt organizations under section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code. **The specific purpose is to provide Mental Health Awareness.**

Section 2:

No part of the net earnings of the organization shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the purpose clause hereof. No substantial part of the activities of the organization shall be carrying on of propaganda, or otherwise attempting to influence legislation, and the organization shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office. Notwithstanding any other provision of the document, the organization shall not carry on any other activities not permitted to be carried on (a) by an organization exempt from federal income tax under section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or (b) by an organization, contributions to which are deductible under section 170 (c) (2) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Section 3:

Upon the dissolution or winding up of the corporation, its assets remaining after payment, or provision for payment, of all debts and liabilities of this corporation shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for religious, charitable, educational, literary, and scientific purposes and which has established its tax exempt status under Section 501 (c) (3), Internal Revenue Code.

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

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Name and Title: _____

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Silver Spring, MD 20906

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Fort Myers, FL 33919 _____

Name and Title: _____ Name and Title: _____
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Name: June Aquil
Address: 2204 Princess Julia Ln.
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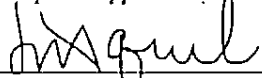
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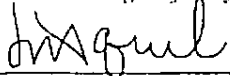
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legalfilings.com

16830 Ventura Blvd, Suite 360
Encino CA 91436
Phone: 818-380-1940
Fax: 818-380-1908

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Enclosed please find two copies of the Articles of Non-Profit Incorporation for **HNA Mental Health Program Inc.**

Also, enclosed is a check made out to Florida Dept of State for the amount of \$78.75.

Please send the stamped articles back to this address:

Legal Filings Inc.
16830 Ventura Blvd, Suite #360
Encino, CA 91436

Sincerely,

Nikki Steen
Customer Services