N230000 11645

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
\	
M PICK-U	P WAIT MAIL
/	
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:

Office Use Only



300413247703

99/11/23--01001--017 **70.00

FILED
2023 SEP 27 PH 4:15

2029 SEP 11 AM11:



September 26, 2023

AVERY CURRY

SUBJECT: INSPIRE REHWINKLE, INC.

Ref. Number: W23000131416

We have received your document for INSPIRE REHWINKLE, INC.. However, the document has not been filed and is being returned for the following:

You failed to make the correction(s) requested in our previous letter.

The state of Florida requires a nonprofit organization to have at least three directors. If there is one (1) director there must be three (3) directors.,

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO Regulatory Specialist II New Filing Section

Letter Number: 423A00022267



COVER LETTER

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

JBJECT:	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX			
closed is an original a	und one (1) copy of the Ar	ticles of Incorporation and	a check for:	
■ \$70.00	□ \$78.75	□\$78.75	□ \$87.50	
Filing Fee	Filing Fee & Certificate of Status		Filing Fee,	
		ADDITIONAL CO	PY REQUIRED	
FROM:	AVERY CURRY	76.11	_	
	Na ***WILL PICK UP***	me (Printed or typed)		
		Address	_	
		City, State & Zip		
	850-339-3910			

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

acurry@theinspiregroup.org

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

The name of the corporation shall be:	REHWINKLE INC.
Principal street address: 1882 CAPITAL CIR NE STE 102	Mailing address, if different is: PO BOX 12493
TALLAHASSEE, FL 32308	TALLAHASSEE, FL 32317
ARTICLE III PURPOSE The purpose for which the corporation is organichariable purposes. The mission of Inspire Reh	This company was organized and shall be operated exclusively for nwinkle is to instill values, improve the social well being of the youths most in need.
while recogning and building upon the interacti	ions of other youth that possess strong and moral character
	2023 SEP 2
	The manner in which the directors are elected and appointed:
Eli Bryant, President	
address PD Box 12493	Name and Title: Marcia Thompson, VP Address: PO Box 12493
Tallahassee, A.	
lame and Title:	retary Name and Title: Gentry Sparks, To
ddress <u>PO Box</u> 12493	O O
Tallahassee FC:	32317 Tallahassee, 4 32317
ame and Title: Avery Curry,	Alyssia Dickey, Board Member Name and Title:
address PD BOV 12493	
Tallahasse A.	32217 Tallahassee, PL 32317

Name and Title:_		Name and Title:
Address _		Address:
_		
_	44.70	
Name and Title:		Name and Title:
Address _		Address:
_		
ARTICLE VI	REGISTERED AGENT	
	orida street address (P.O. Box NOT acco	eptable) of the registered agent is:
Name:	Avery Curry	
Address:	1882 Capital Cir NE Ste 102	
	Tallahassee, FL 32308	
ARTICLE VII	INCORPORATOR Idress of the Incorporator is:	
Name:	Shannon Rosier	
Address:	PO Box 16375	
Address.	Tallahassee, FL 32317	
a mandale an Elekk	PPPECTIVE DATE.	
Effective date, if	other than the date of filing: 09/11/2023	(OPTIONAL)
(If an effective d	ate is listed, the date must be specific a	and cannot be more than five days prior or 90 days after the filing.)
Note: If the date document's effect	inserted in this block does not meet the attive date on the Department of State's rea	applicable statutory filing requirements, this date will not be listed as the cords.
		of war and for the above stated composition at the place designated in this
- Having been nat - certificate, I am f	nca as registerea agent to accept service amiliar with and accept the appointment	e of process for the above stated corporation at the place designated in this as registered agent and agree to act in this capacity
ATION	to Chima	9/11/2023
7 100	Required Signal of Registered	d Agent Date
I submit this docu	ument and affirm that the facts stuted here of State constitutes a third degree felony a	ein are true. I am aware that any false information submitted in a document to s provided for in s.817.155. F.S.
- ine crepariment i	ј олисе синатинев и ниги иед се јетоту и:	to be consistent that the consistency of the