

N23000013221

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

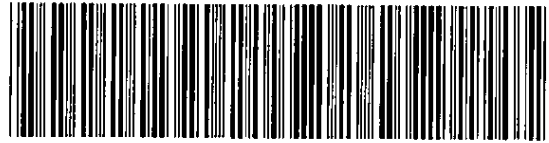
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

10/31/23

Office Use Only



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J. GRANTHAM  
NOV -5 2023

10/04/23--01003--014 \*\*70.00

FILED

2023 OCT 31 PM 1:56

SECRETARY OF STATE  
TALLAHASSEE, FL

RECEIVED

2023 OCT -4 PM 12:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 5, 2023

TYRA BOWERS  
901 ROCKINGHAM AVE  
TAVARES, FL 32778 US

SUBJECT: CHANCE OF HOPE INC  
Ref. Number: W23000136274

We have received your document for and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham  
Regulatory Specialist III  
Director's Office

Letter Number: 623A00022981

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DIVISION OF CORPORATIONS  
REGULATORY SERVICES

## COVER LETTER

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

SUBJECT: CHANCE OF HOPE 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: Tyra Bowers  
\_\_\_\_\_  
Name (Printed or typed)

901 Rockingham Ave  
\_\_\_\_\_  
Address

Tavares, FL 32778  
\_\_\_\_\_  
City, State & Zip

352-602-8760  
\_\_\_\_\_  
Daytime Telephone number

admin@rosierco.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: CHANCE OF HOPE INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
901 ROCKINGHAM AVE

TAVARES, FL 32778

Mailing address, if different is:  
PO BOX 740

TAVARES, FL 32778

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: THIS PROGRAM IS ORGANIZED AND SHALL BE OPERATED  
EXCLUSIVELY FOR CHARITABLE PURPOSES AND QUALIFY FOR TAX EXEMPT STATUS UNDER SECTION 501(C)(3)  
OF THE INTERNAL REVENUE CODE OF 1954, AS AMENDED FOR THE PURPOSE.

THE MISSION OF CHANCE OF HOPE INC IS TO INSTILL VALUES, IMPROVE THE SOCIAL WELL BEING OF YOUTH  
MOST IN NEED WHILE RECOGNIZING AND BUILDING UPON THE INTERACTION OF OTHER YOUTH WHO  
POSSES STRONG AND MORAL CHARACTER

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: See Attached

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Ashia Bowers, Chairperson

Address: 472 SUN LAKE CIRCLE APT 108  
LAKE MARY, FL 32746

Name and Title: Tyra Bowers, Vice Chairperson

Address: 901 ROCKINGHAM AVE  
TAVARES, FL 32778

SECRETARY OF STATE  
TALLAHASSEE, FL

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Name and Title: Ashia Bowers, Secretary

Address: 472 SUN LAKE CIRCLE APT 108  
LAKE MARY, FL 32746

Name and Title: Tyra Bowers, Treasure

Address: 901 ROCKINGHAM AVE  
TAVARES, FL 32778

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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: Taylor Rosier  
Address: 1882 Capital Cir NE St 102  
Tallahassee, FL 32308

**FILED**  
**2023 OCT 31 PM 1:56**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FL**

**ARTICLE VII INCORPORATOR**

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

Name: Taylor Rosier  
Address: 1882 Capital Cir Ne Ste 102  
Tallahassee, FL 32308

**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.)

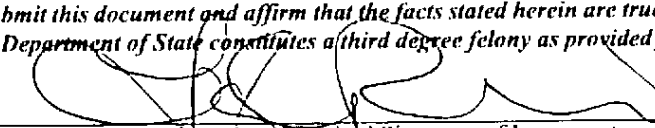
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

10/4/23  
\_\_\_\_\_  
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

10/4/23  
\_\_\_\_\_  
Date

#### ARTICLE IV

The Board of Directors (Board) of **CHANCE OF HOPE INC.** shall be composed of both elected and appointed members. The elected members shall be the presiding officers and shall consist of a chair, vice-chair, secretary, and treasurer.

The elected officers, along with the Executive Director of the program shall make up the Executive Committee of Chance of Hope, Inc. The elected officers shall be nominated from the seated Board with a term of office not to exceed one year and up to two consecutive terms. Nominations can or will be made by any elective or appointed Board member.

Appointed Board members will consist of association, organization, business, faith-base, and community representatives and shall be invited to sit on the Sub-Committee with the approval Executive Director of Chance of Hope, Inc. The Board shall consist of not less than three and no more than five members.

The Board shall be responsible for the development, management and control of the affairs, property and funds of the corporation and shall exercise all such powers and authority as expressly or by implication, conferred on them by these Articles of Incorporation, Bylaws of the corporation and the State of Florida

**FILED**

**2023 OCT 31 PM 1:56**

**SECRETARY OF STATE  
TALLAHASSEE, FL**