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FLORIDA PROFIT BENEFIT CORPORATION

COVER LETTER

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

SUBJECT: Women and Children's Village Kins Community, Florida, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of Status
ADDITIONAL COPY REQUIRED

FROM: Casey Cummings
Name (Printed or typed)

802 NE 20th Ave
Address

Fort Lauderdale, FL 33304
City, State & Zip

954-769-1344
Daytime Telephone number

Casey @ RosenbergCummings.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 FOR FLORIDA PROFIT BENEFIT CORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the benefit corporation shall be: Women and Children's Village Kins Community, Florida Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
8995 S. Indian River Drive
Fort Pierce, FL 34982

Mailing address, if different is:

Same as Principal office

ARTICLE III BENEFIT STATEMENT AND BUSINESS PURPOSE

The corporation elects to be a benefit corporation in accordance with s. 607.603, F.S.

The purpose for which the corporation is organized is to create a general public benefit and:

Agriculture Development

The general and/or specific public benefit(s) to be created by the corporation (in addition to its general purpose) is/are as follows (optional):

Change the world by providing a new economic model in every aspect of society focusing on a new kind of community called Kins community, to create a new clean green american agriculture industrial revolution based on the concepts of a kins domain primarily supporting abused and neglected women and children.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS, DIRECTORS, BENEFIT DIRECTOR AND BENEFIT OFFICER (if Applicable)

Name and Title: ~~Graig Perlowin~~

Address: ~~8995 S Indian River~~

~~Drive~~

~~Fort Pierce, FL 34982~~

Name and Title: Bruce Perlowin, President

Address: 8995 S. Indian River Drive

Fort Pierce, FL 34982

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

If applicable, BENEFIT DIRECTOR:

Name: _____

Address: _____

Name and Title: _____

Address: _____

If applicable, BENEFIT OFFICER:

Name: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: _____

Rosenberg, Cummings, Edwards PLLC

Address: _____

802 NE 20th Ave
Fort Lauderdale, FL 33304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: _____

Casey Cummings

Address: _____

802 NE 20th Ave
Fort Lauderdale, FL 33304

ARTICLE VIII ADDITIONAL QUALIFICATIONS OF BENEFIT DIRECTOR, IF ANY:

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

Casey Cummings

Required Signature/Registered Agent

1/19/2018
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Casey Cummings

Required Signature/Incorporator

1/19/2018
Date

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