Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000303390 3)))



H200003033903ABCU

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

\*\*Enter the email address for this business entity to be used for future Sannual report mailings. Enter only one email address please.\*\*

mail Address: Kr

KRothemich@damarsillp.com

# FLORIDA PROFIT/NON PROFIT CORPORATION SpreadYourVoiceOrg Co.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

**C** RICO SEP - 1 2920

# ARTICLES OF INCORPORATION FOR FLORIDA PROFIT BENEFIT CORPORATION

→ 18506176381

In compliance with Chapter 607, F.S. (Profit)

# **ARTICLE 1: NAME**

○ 09/01/2020 6:45 AM

The name of the benefit corporation shall be: SpreadYourVoiceOrg Co.

## ARTICLE II: PRINCIPAL OFFICE

Principal street address:

8525 Danbury Boulevard #202

Mailing Address: Same

Naples, Florida 34120

# 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:

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under Florida Law. The corporation is not formed to engage in any act or activity requiring the consent or approval of any state official, department, board, agency or other body without such consent or approval first being obtained.

The general and/or specific public benefit(s) to be created by the corporation (in addition to its general purpose) include but are not limited to (optional):

1) providing low-income or underserved individuals or communities with beneficial products or services; (2) promoting economic opportunity for individuals or communities beyond the creation of jobs in the normal course of business; (3) preserving the environment; (4) improving human health; (5) promoting the arts, sciences or advancement of knowledge; (6) increasing the flow of capital to entities with a public benefit purpose; and (7) the accomplishment of any other particular benefit for society or the environment.

#### **ARTICLE IV: SHARES**

The number of shares of stock is: 250 No Par Value

H20000303390

# ARTICLE V: INITIAL OFFICERS, DIRECTORS, BENEFIT DIRECTOR AND **BENEFIT OFFICER (if applicable)**

Name and Title:

Nolan Studley, President, Founder, Director, Benefit Director and

→ 18506176381

Benefit Officer

Address:

⊙ 09/01/2020 6:45 AM

8525 Danbury Boulevard #202

Naples, Florida 34120

## ARTICLE VI: REGISTERED AGENT

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

Nolan Studley 8525 Danbury Boulevard #202 Naples, Florida 34120

## ARTICLE VII: INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Kerry F. Rothemich, CPA, Esq. for Marsicovetere & Colavecchio LLP 198 Terry Road Smithtown, New York 11787 631-265-1613 x12

## ARTICLE VIII: ADDITIONAL QUALIFICATIONS OF BENEFIT DIRECTOR IF ANY

No additional qualifications listed at this time.

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/Registered Agent

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