EXHIBIT I

N/4-000011657

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAI (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Requestor's Name)	
(City/State/Zip/Phone #) PICK-UP WAIT MAI (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone	e #)
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT	MAIL
Certified Copies Certificates of Status	(Business Entity Nan	ne)
	(Document Number)	
Special Instructions to Filing Officer:	Certified Copies Certificates	s of Status
·	Special Instructions to Filing Officer:	
·		



700267499487

700267499487 12/23/14--01030--012 **78.75

FILED

14 DEC 23 PM IZ: 28

SEERING ALCOHOL

SEERING ALCO

12/24/14

COVER LETTER

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

SUBJECT: Victims Refuse Silence, 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 □ \$78.75

Filing Fee & Certificate of Status

□\$78.75 □ \$87.50

Filing Fee

& Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Bradley J. Edwards, Esq.

Name (Printed or typed)

425 North Andrews Ave. Suite 2

Address

Fort Lauderdale, FL 33301

City, State & Zip

800-400-1098

Daytime Telephone number

brad@pathtojustice.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	he corporation shall be: Victims Refus	se Silence,	Inc.	
ARTICLE I				
40	Principal street address:		Mailing address, if different is:	
	5 North Andrews Ave.			
Sı_	uite 2			
Fo	ort Lauderdale, FL 33301			-
ARTICLE I	Vict	ims Refuse Silen	ice, Inc. is organized exclusively for cl	naritable and
	for which the corporation is organized is:		· · · · · · · · · · · · · · · · · · ·	
	ns under section 501(c)(3) of the Internal R	•		
	corporation is organized to provide assistar			
-	issolution of Victims Refuse Silence, Inc.,			
			<u>`</u>	
	ng of section 501(c)(3) of the Internal Re			·
code, or si	hall be distributed to the federal govern	nment, or to a s		·····
ARTICLE 1	V MANNER OF ELECTION The ma	anner in which the	directors are elected and appointed: The	manner in
which the	directors are elected or appointed	is provided in	the bylaws of the Corporation.	
ARTICLE	V INITIAL OFFICERS AND/OR DI	RECTORS		
Name and Ti	tle: Virginia Roberts, Director	Name and Title:		TI
Address	425 North Andrews Ave.	Address: _	<u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	
	Suite 2			Ü
	Fort Lauderdale, FL 33301			
Name and Ti	tle: Bradley J. Edwards, Director	Name and Title:		•
Address	425 North Andrews Ave.	Address:		
	Suite 2			
	Fort Lauderdale, FL 33301	-		
Name and Ti	tle: Brittany N. Henderson, Director	Name and Title:		
Address	425 North Andrews Ave.	Address:		
- 100.000	Suite 2	_		
	Fort Lauderdale, FL 33301			

Name and Title:		Name and Title:		 -	
Address		Address:		_	
		Name and Title:Address:			
ARTICLE VI The name and Flo Name:	REGISTERED AGENT rida street address (P.O. Box NOT accepta Bradley J. Edwards	able) of the registered agent is:			
Address:	425 North Andrews Ave., Su	uite 2	7 (3) ((3) ((3) ((3)	14	
Address.	Fort Lauderdale, FL 333	301		DEC 23	7
ARTICLE VII The name and add Name: Address:	INCORPORATOR Iress of the Incorporator is: Brittany N. Henderson 425 North Andrews Ave., St			EU M 12: 25	7
	Fort Lauderdale, FL 33	3301			
		f process for the above stated corporation a registered agent and agree to act in this capa		ce designa	ted in this
		12	? - /	17-1	4
	Required Signature of Registered A	Agent	Date	e	<u>.</u>
	ment and affirm that the facts stated herein of State constitutes a third degree felony as	n are true. I am aware that any false informa s provided for in s.817.155, F.S.	tion subi	mitted in a	document
Break	Required Signature of Incorpo	orator \\\] 7 <u> </u> Dai	1 <u>4</u>	_