

## Secretary of State Articles of Incorporation of a

## Articles of Incorporation of a Nonprofit Public Benefit Corporation

IMPORTANT — Read Instructions before completing this form.

Filing Fee - \$30.00

Copy Fees - First page \$1.00; each attachment page \$0.50;

Certification Fee - \$5.00

Note: A separate California Franchise Tax Board application is required to obtain

For Office Use Only

-FILED-

File No.: 6414461 Date Filed: 10/1/2024

| tax exempt status. For more information, go to https://www.ftb.ca.gov.  |   | This Space For Office Use Only               |                       |                       |              |
|---|---|--|-----------------------|-----------------------|--------------|
| 1. Corporate Name (Go to www.sos.ca gov/business/be/name-av   | ailability for general corpor                   | ate name requirement                         | s and restri          | ictions.)             |              |
| The name of the corporation is The Neurofeedback Nets   | work  | <del></del>                                  | <del>.</del>          |                       |              |
|   |   |  |                       |                       |              |
| 2. Business Addresses (Enter the complete business addresse   | s. Item 2a cannot be a P.C                      | Box or "in care of an                        | individual            | or entity.)           | l            |
| a. Initial Street Address of Corporation - Do not enter a P.O. Box     673 Chinook Drive  | City (no abbreviations  Ventura                 | City (no abbreviations)  Ventura             |                       | Zip Code<br>93001     |              |
| b. Initial Mailing Address of Corporation, if different than item 2a Same as above  | City (no abbreviations                          | City (no abbreviations)                      |                       | Zip Code              |              |
| <ol> <li>Service of Process (Must provide either Individual OR Corporal<br/>INDIVIDUAL – Complete Items 3a and 3b only. Must include agent's</li> </ol>   | •   | street address.                              |                       |                       |              |
| a. California Agent's First Name (if agent is <b>not</b> a corporation)  Robert   | Middle Name<br>J.                               | Last Name<br>Bishop                          | Suffix                |                       |              |
| b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 673 Chinook Drive   | City (no abbreviation:<br>Ventura               | tions)                                       |                       | Zip Cod<br>9300:      |              |
| CORPORATION - Complete Item 3c. Only include the name of the  | registered agent Corporati                      | on.  |                       |                       |              |
| c. California Registered Corporate Agent's Name (if agent is a corporation) – I  Item 4a: One or both boxes must be   | checked.  |  |                       |                       |              |
| 4. Purpose Statement Item 4b: If "public" purposes is check must enter the specific purp  |   | nd to apply for tax-exe                      | mpi status            | in Cautori            | nia, you     |
| a. This corporation is a nonprofit public benefit corporation and is the Nonprofit Public Benefit Corporation Law for:  | ·   | ivate gain of any pe<br>iritable purposes.   | rson. It is           | organizo              | ed under     |
| b. The specific purpose of this corporation is to  To improve quality of life by promoting optimal brain function through application of proven neurofeedback training  |   |  |                       |                       |              |
| 5. Additional Statements (See Instructions and Filing Tips.   | <del></del>                                     | HOICEGDEEK GEH                               | mig                   |                       | <u>.</u>     |
| a. This corporation is organized and operated exclusively for the   | <del></del>                                     | ticle 4 hereof within                        | the mean              | ing of In             | ternal       |
| Revenue Code section 501(c)(3).  b. No substantial part of the activities of this corporation shall con legislation, and this corporation shall not participate or interven statements) on behalf of any candidate for public office.               |   |  |                       |                       |              |
| c. The property of this corporation is irrevocably dedicated to the<br>of this corporation shall ever inure to the benefit of any director  |   |  |                       |                       |              |
| d. Upon the dissolution or winding up of this corporation, its asset<br>liabilities of this corporation shall be distributed to a nonprofit fu<br>exclusively for charitable, educational and/or religious purpo<br>Revenue Code section 501(c)(3). | is remaining after paymend, foundation or corpo | ent, or provision for pration which is organ | payment,<br>nized and | of all del<br>operate | bts and<br>d |
| 6. Read and Sign Below (This form must be signed by each in   |   |  | e a title.)           |                       |              |
| Evoer J. Lunop  |   | Robert J. Bishop  Type or Print Name         |                       |                       |              |
| Signature //  | rype of Pi                                      | na ivame                                     |                       |                       |              |