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(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

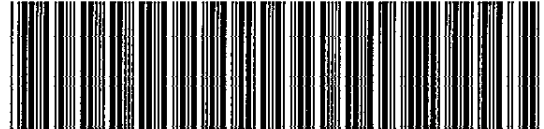
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

03 AUG 20 PM 2:25

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 AUG 20 PM 2:22

F. CHAMBERLAIN

AUG 20

TRANSMITTAL LETTER

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

SUBJECT: _____

Alpha Psi Kappa Fraternity, 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: _____

Alpha Psi Kappa Fraternity, INC.
Name (Printed or typed)

PMB# 117 - 1700 N. Monroe St. Suite # 11
Address

Tallahassee, FL 32303
City, State & Zip

850 322 - 6440
Daytime Telephone number

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:

Alpha Psi Kappa Fraternity, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

PMB # 117
1700 N. Monroe St. Suite #11
Tallahassee, FL 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of Alpha Psi Kappa Fraternity is to transform an individual through brotherhood, leadership, scholarship, service, and divers using these things abrotherhood of this fraternity can advance into great heights and help others into a more profound world.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

biennially at National Conclave
in the even years.

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name(s), address(es) and title(s):

(P) Daryl Benjamin
1400 Diston St
Tallahassee, FL 32310

~~Daryl Benjamin~~

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Daryl Benjamin
1400 Diston St.
Tallahassee, FL 32310

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Daryl Benjamin
1400 Diston St.
Tallahassee, FL 32310

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.

Daryl Benjamin
Signature Registered Agent

Date

8/20/03

Daryl Benjamin
Signature Incorporator

Date

8/20/03

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TALLAHASSEE, FLORIDA
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