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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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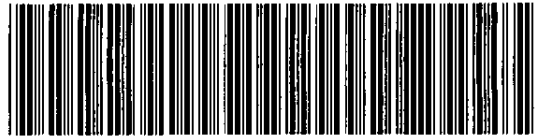
(Business Entity Name)

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10 FEB 16 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2-17-10 CH

COVER LETTER

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

SUBJECT: Disabled American Veterans Auxiliary, Unit 152, Delray Beach, Fl.
(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: Disabled American Veterans Auxiliary, Unit 152 ■
Name (Printed or typed)

P.O. Box 8054
Address

Delray Beach, Fl 33482
City, State & Zip

561-496-3864
Daytime Telephone number

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 NAME

The name of the corporation shall be:

Disabled American Veterans Auxiliary, Delray Beach, Florida, Unit 152, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

South County Civic Center, 16700 Jog Road, Delray Beach, Florida
(Mail) P.O. Box 8045 Delray Beach, FL. 33482

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To help veterans and their families. Supplement and assist the DAV Delray Beach, FL,
Chapter 152

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Nominations are taken, as stated in the Florida State By-laws.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Fried, Irwin	561-742-8112	Commander
Schwartz, Estel		Sr. Vice, Commander
Goldberg, Gail		Jr. Vice, Commander
Mudonia, Gloria	561-736-2454	Treasurer
Corbett, Shirley	561-742-8016	Chaplain

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Olivia Kennedy, 6187 Overland Place, Delray Beach, FL 33484

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Irwin Fried, P.O. Box 741054, Boynton Beach, FL 33474

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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.

Olivia Kennedy

Signature/Registered Agent

2/11/2010

Date

Irwin Fried

Signature/Incorporator

2/11/2010

Date