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## **COVER LETTER**

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

SUBJECT: Friends of the Carver Ranches Library, Inc.						
	(PROPOSED CORPORATION OF THE Artic	E NAME – <u>MUST INCLI</u>	UDE SUFFIX)			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75  Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate OPY REQUIRED			
FROM: Carolyn M. Hardy Name (Printed or typed)						
c/o 4735 SW 18th Street  Address						
West Park, FL 33023 City, State & Zip						
954-987-4047  Daytime Telephone number						

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

## ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I	NAME Friends of the Carver F	Ranches Libra	ry, Inc.		
i ne name or the co	orporation shall be:				
ARTICLE II	PRINCIPAL OFFICE				
-	Principal street address		Mailing address, if different is:		
	4735 Southwest 18th Street	<del>-</del> -			
	West Park, FL 33023	<del>-</del> -			
ARTICLE III	PURPOSE				
The purpose for v	which the corporation is organized is:				
Library system	e promotion and development of public libral , to create public interest in the Broward Co lic support for the development of the library	unty library; to p	romote understanding of it service & needs		
ARTICLE IV	MANNER OF ELECTION The manner in	which the directors	are elected and appointed:		
Volunteers a	re selected via general meeting				
ARTICLE V	•	RS			
	itle: Elvira E. Sears - Vice President		:Richard Cooper, President		
Address:	4735 Southwest 18th Street	_ Address:	4735 Southwest 18th Street		
	West Park, FL 33023	<del>-</del>	West Park, FL 33023		
	Nul. Associate Claula Constant				
	itle:Anastasia Clark, Secretary				
Address:	4735 Southwest 18th Street West Park, FL 33023				
	West Fain, FL 33023	<b></b>			
Name and T	Carolyn M. Hardy Transurer	Nome and Title			
Address:	4735 Southwest 18th Street	_ Name and The	•		
Address.	West Park, FL 33023	Address.			
		<del></del>			
ARTICLE VI	REGISTERED AGENT				
	orida street address (P.O. Box NOT acceptable) o	f the registered ages	nt is:		
Name:	Carolyn M. Hardy	<del></del>			
Address:	4735 Southwest 18th Street	_			
	West Park, FL 33023	<del></del>			
		<del></del>			
ADDIOL P. IZIT	INCORPORATOR				
ARTICLE VII	dress of the Incorporator is:		经基 午 而		
Name:	Carolyn M. Hardy				
Address:	4735 Southwest 18th Street	<del>-</del>			
riddress.	West Park, FL 33023	<del>-</del>			
	TOOL COMMENT	<del></del>	<u>ို့ ႏု</u> ယ		
II-ina basa nan	used an assistanced assess to accept namine of process	ace for the above	stated corporation at the place designated in this		
	nea as registered agent to accept service of proce Amiliar with and accept the appointment as register				
/ N			e w uci m mis capacity		
( / / )	and the		2/15/11		
	Required Signature of Registered Agent				
$\overline{}$	Required Signature of Registered Agent		Date		
I submit this document and affirm that the facts stated herein are true. I am aware that any 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.					
( )	$\rho \rightarrow l l \cdot \rho$		A/12/		
1 guit	en M. Karley		<u>2//5///</u>		
	Required Signature of Incorporator		Date		