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SECRETARY OF STATE
DIVISION OF CORPORATIONS &
2014 MAY 12 PM 3:30

1/11

COVER LETTER

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

SUBJECT: VALENCIA POINTE WOMEN'S CLUB 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: WALLIS SHERMAN
Name (Printed or typed)

7475 MAPLE RIDGE TRAIL
Address

BOYNTON BEACH, FL 33437
City, State & Zip

561-632-5192
Daytime Telephone number

SHERMANWALLI@BELLSOUTH.NET
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: VALENCIA POINTE WOMEN'S CLUB INC

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ARTICLE II PRINCIPAL OFFICE

Principal street address:
7475 MAPLE RIDGE TRAIL
BOYNTON BEACH, FL 33437

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SOCIAL CLUB TO ENHANCE THE LIFE OF THE WOMEN OF THE COMMUNITY.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: _____

POPULAR VOTE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: WALLIS SHERMAN, PRES
Address: 7475 MAPLE RIDGE TRAIL
BOYNTON BEACH, FL 33437

Name and Title: ANNE POPIEL, TREAS
Address: 7307 MAPLE RIDGE TRAIL
BOYNTON BEACH, FL 33437

Name and Title: MARIAN KAHAN, SEC
Address: 6738 WATERTOWN DR
BOYNTON BEACH, FL 33437

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

2014 MAY 12 PM 3:30

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: WALLIS SHERMAN
Address: 7475 MAPLE RIDGE TRAIL
BOYNTON BEACH, FL 33437

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: WALLIS SHERMAN
Address: 7475 MAPLE RIDGE TRAIL
BOYNTON BEACH, FL 33437

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

Wallis Sherman
Required Signature of Registered Agent

5-6-2014
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.

Wallis Sherman
Required Signature of Incorporator

5-6-2014
Date