

N160000010512

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

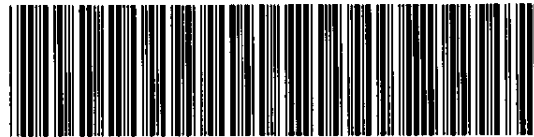
(Business Entity Name)

(Document Number)

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16 OCT 28 AM 10:51
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AND
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COVER LETTER

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

SUBJECT: BUC Technologies Foundation, 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: Tawainga Katsvairo

Name (Printed or typed)

1908 Nannette Street

Address

Tallahassee, FL 32303

City, State & Zip

850 508 2127

Daytime Telephone number

tawainga@buctechnologies.com

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: BUC Technologies Foundation, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address: 1908 Nannette Street
Tallahassee, FL 32303

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to conduct special projects in STEM education and enviromental conservation.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Have
expertise & knowledge in education, environmental issues and
communities

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Dr. Fanchon Felice Funk, Director</u>	Name and Title:	<u>Dr. Thomas Cellucci, Director</u>
Address	<u>4133 Diplomacy Circle</u> <u>Tallahassee, FL 32308</u>	Address:	<u>1 Mifflin Place, Suite 400</u> <u>Cambridge, MA 02138</u>

Name and Title:	<u>Mr. Christopher Weider, Director</u>	Name and Title:	_____
Address	<u>3711 Shamrock St. W. Apt E129</u> <u>Tallahassee, FL 32309</u>	Address:	_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____

16 OCT 28 AM 10:51
SECRET
TALLAHASSEE FL 32304
ANNEX JAVEL
AVS
C1153

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

 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: Tawainga Katsvairo
 Address: 1908 Nannette
Tallahassee, FL 32303

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Tawainga Katsvairo
 Address: 1908 Nannette Street
Tallahassee, FL 32303

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

WTKatsvairo 10/28/2016
 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.

WTKatsvairo 10/28/2016
 Required Signature of Incorporator Date