

No 3000010025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

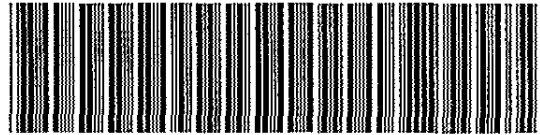
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600024406956

11/05/03--01028--014 **78.75

FILED
03 NOV -5 AM 9:31
TALLAHASSEE, FLORIDA
STATE

No 3-34212

PR 11/18

TRANSMITTAL LETTER

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

SUBJECT: NAM KNIGHTS OF AMERICA M.C., BROWARD
COUNTY FLORIDA, 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: LAIZZY SULLINGER
Name (Printed or typed)

7170 N.W. 6TH COURT
Address

MAIRGATE, FLORIDA 33063
City, State & Zip

954/968-8050
954/443-3434
Daytime Telephone number

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

Larry Sullenger

7170 N. W. 6th Court
Margate, Florida 33063

954/968-8050
devilskicker@AOL.COM

FILED
03 NOV -5 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Nam Knights of America M.C., Broward County Florida, Inc.
October 31, 2003

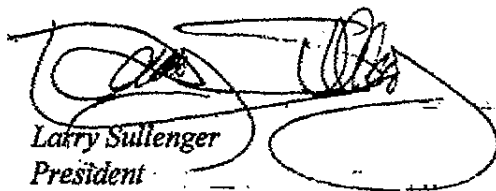
Dear Sirs:

*Please dissolve our original "for profit" corporation in the above name
and incorporate us as "non-profit" under the same name.*

*I originally paid a company to incorporate us and they did it wrong.
Now I am trying to correct these errors.*

Thank you for your assistance.

Respectfully,



Larry Sullenger
President

Nam Knights of America M.C., Broward County Florida, Inc.

P.S. I WILL NOT REVOKE DISSOLUTION.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: **NAM KNIGHTS OF AMERICA
M.C., BROWARD COUNTY FLORIDA, INC.**

ARTICLE II PRINCIPAL OFFICE

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

**6561 SUNSET STRIP
SUNRISE, FLORIDA 33313**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ASSIST DISABLED U.S. MARINE VETERANS AND LAW ENFORCEMENT OFFICERS, THEIR DEPENDENTS, WIDOWS AND ORPHANS OF DECEASED VETERANS AND LAW ENFORCEMENT OFFICERS. WE WILL MAKE NO PROFITS AND HAVE NO EMPLOYEES.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

ELECTED ANNUALLY FOR ONE YEAR TERMS SUBMITTED IN FEBRUARY AND EFFECTIVE MARCH - FULL MEMBERS IN GOOD STANDING VOTE VIA BALLOT.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

**LARRY SULLENGER 7170 N.W. 6TH COURT MAZGATE FL 33063 PRESIDENT
ROBERT LELAND 949 RIVERSIDE DRIVE CORAL SPRING FL 33071 VICE PRESIDENT
1ST SERGEANT AT ARMS - VACANT - V.P. IS FILLING IN TEMPORARILY.
MICHAEL SHEPHERD 1651 S.W. 127TH AVE DAVIE FL 33325 SECRETARY
NELSON HECK 1110 N.W. 18TH ST., FORT LAUDERDALE FL TREASURER**

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

**LARRY SULLENGER
7170 N.W. 6TH COURT
MAZGATE, FLORIDA 33063**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**LARRY SULLENGER
7170 N.W. 6TH COURT
MAZGATE, FLORIDA 33063**

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.

Signature/Registered Agent

Date

10/30/03

Signature/Incorporator

Date

10/30/03

FILED
03 NOV -5 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA