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(Req	uestor's Name)	
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Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	





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TRANSMITTAL LETTER

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

SUBJECT: GLENM	UIR ALUMNI ASSOCIAT			
	(PROPOSED CORPORATE	: NAME – <u>MUST INCLUI</u>	<u>DE SUFFIX</u>)	
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		
	C To any Dr. or	T.0		
FROM: FIZRO BENJAMIN Name (Printed or typed)				
18623 SW 7th STREET				

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

PEMBROKE PINES FL 33029
City, State & Zip

(305) 887-7791 Daytime Telephone number

ARTICLES OF INCORPORATION

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

ARTICLE I

The name of the corporation shall be:

GLENMUIR ALUMNI ASSOCIATION, SOUTH FLORIDA CHAPTER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 18623 SW 7TH STREET PEMBROKE PINES, FL 33029

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THIS STATE, TO PROMOTE AND ADVANCE THE INTEREST OF GLENMUIR HIGH SCHOOL AND ITS ALUMNI

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

THIS CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY. THE NUMBER OF DIRECTORS MAY BE EITHER INCREASED OR DECREASED FROM TIME TO TIME BY THE BY-LAWS, BUT SHALL NEVER BE LESS THAN ONE. THE NAME AND ADDRESS OF THE INITIAL DIRECTOR OF THIS CORPORATION IS: FITZROY BENJAMIN, 18623 SW 7TH STREET, PEMBROKE PINES, FL 33029

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

FITZROY BENJAMIN 18623 SW 7TH STREET, PEMBROKE PINES, FL 33029

DAVID SCOTT 13121 SW 130TH STREET, PEMBROKE PINES, FL 33027

VINDELLA HEATH 1120 NW 3RD AVENUE, MIAMI, FL 33127

OWEN ATKINSON 212 NW 152ND LANE, PEMBROKE PINES, FL 33025 **NEVILLE LEWIS**

6759 GREEN ISLAND CIRCLE, LAKE WORTH, FL 33463 PUBLIC RELATIONS OFFICER

DIRECTOR, PRESIDENT VICE PRESIDENT

SECRETARY

TREASURER

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

FITZROY BENJAMIN 18623 SW 7TH STREET, PEMBROKE PINES, FL 33029



ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

NEVILLE LEWIS 6759 GREEN ISLAND CIRCLE, LAKE WORTH, FL 3346

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.

ture/Registered Agent Signature/Incorporator