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# TRANSMITTAL LETTER

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

SUBJECT:				INC.		
(Proposed corporate name - must include suffix)						

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

S70.00 S78.75 Filing Fee & Certificate of

Department of State

□ \$78.75
Filing Fee & Filing Fee
Certificate of & Certified Copy
Status

ADDITIONAL COPY REQUIRED

\$87.50

Filing Fee,

Certified Copy

& Certificate

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

## ARTICLES OF INCORPORATION

OF

# Yahtok'ya Animal Sanctuary, Inc.

#### A NON-PROFIT CORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopts the following Articles of Incorporation:

# ARTICLE I. NAME

The name of this corporation shall be Yahtok'ya Animal Sanctuary, Inc.

## ARTICLE II. PRINCIPAL OFFICE

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

4817 244th Avenue P.O. Box 92 LaCrosse, FL 32658

## ARTICLE III. PURPOSES, LIMITATION OF POWERS, AND DISSOLUTION

A. PURPOSES: The specific purposes for which this corporation is organized are:

To educate the public about humane care and protection of animals kept as pets, and wildlife.

To conduct various fund raising activities, including retail sales. Based on recommendations by the Board of Directors, money from these activities may be donated to various organizations that promote the care, protection, and welfare of animals.

To establish and manage any program deemed necessary to reduce the population of and promote humane treatment of abused, neglected, abandoned, and/or homeless animals.

To provide a home for as many abused, neglected, abandoned and/or homeless animals – both wild and domestic – as our facility is capable of housing and caring for appropriately. Animals may remain at this facility for the duration of their lives, or until such time as they are adopted by persons deemed suitable to continue their care elsewhere.

B. LIMITATION OF POWERS: This corporation is organized exclusively for charitable purposes as specified in Section 501 (c)(3) of the Internal Revenue Code. Notwithstanding any other provision of these articles, this organization shall not carry on any activities not permitted to be carried on by an organization exempt from Federal income tax under section

501 (c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue Law.

C. In the event of DISSOLUTION, the residual assets of the organization will be turned over to one or more organizations which themselves are exempt as organizations described in sections 501(c)(3) and 170(c)(2) of the Internal Revenue Code of 1986 or corresponding sections of any prior or future Internal Revenue Code, or to the Federal, State, or local government for exclusive public purpose.

#### ARTICLE IV. MANNER OF ELECTIONS OF DIRECTORS

The manner in which the directors are elected or appointed is by a majority of votes by the Board of Directors.

The initial Directors are:

Erika J. Capin 4817 244th Ave P.O. Box 92 LaCrosse, FL 32658 Bruce M. Capin 4817 244th Ave P.O. Box 92 LaCrosse, FL 32658 Heather Wood 405 SE 2<sup>nd</sup> Ave. Apt. #41

Gainesville, FL 32601

## ARTICLE V: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial Registered Agent are:

Erika J. Capin 4817 244th Ave LaCrosse, FL 32658

#### ARTICLE VI. INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation is:

B. CASINE

12 -12 -03

Bruce M. Capin 4817 244th Ave LaCrosse, FL 32658

Date

# REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Cirka J. Capin

12-12-03

Erika J. Capin, Registered Agent

Date

SECRETARY OF STATE
TALLAHASSEE, FLURIDA