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FLORIDA STATE
TALLAHASSEE, FLORIDA

05 APR -8 AM 8:25

FILED

4/14/05
BWK

TRANSMITTAL LETTER

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

SUBJECT: FRIENDS OF TOBAGO AIDS SOCIETY 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: IRWIN SOLOMON MD
Name (Printed or typed)

14500 LURAY ROAD
Address

SW RANCHES FL 33330
City, State & Zip

954-252-8389
Daytime Telephone number

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:

FRIENDS OF TOBAGO AIDS SOCIETY INC. APR -8 AM 8:25

ARTICLE II PRINCIPAL OFFICE

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

14500 LURAY RD
SOUTHWEST RANCHES
FL 33330

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The specific and primary purpose for which this corporation is formed is to provide assistance (medically, educationally and financially) to persons affected and infected with HIV/AIDS in the Island of Tobago.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors are elected in the first election, and at all times thereafter, shall serve for a term of two years.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

IRWIN SOLOMON (President) 14500 LURAY RD SW RANCHES FL 33330
MAUREEN PHILLIPS (TREASURER) 1350 VENITIAN DR PEMBROKE PINES FL 33542
VALERIE SOLOMON (SECRETARY) 14500 LURAY RD SW RANCHES FL 33330

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

IRWIN SOLOMON MD
14500 LURAY ROAD
SW RANCHES, FL 33330

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

IRWIN SOLOMON MD
14500 LURAY RD
SW RANCHES, FL 33330

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 IRWIN SOLOMON MD

Date

4/6/05

Signature/Incorporator

Date

4/6/05