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SECRETARY OF STATE

136-28

# TRANSMITTAL LETTER

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

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

**\$70.00** Filing Fee Filing Fee

& Certificate

**□\$122.50** 

Filing Fee

& Certified Copy

**\$131.25** 

Filing Fee,

Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

201/25 mid 201/25

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

05 JUN 27 PM 2:59

#### ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not For Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

#### ARTICLE I NAME

The name of the corporation shall be:

The Everglades High Volleyball Booster Club, Inc.

#### ARTICLE II PRINICPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 18451 N.W. 9<sup>th</sup> St.

Pembroke Pines, Fl 33029

# ARTICLE III PURPOSES(S)

The specific purpose(s) for which the corporation is organized is (are): The Corporation is organized exclusively for charitable and educational purposes including funding of the Everglades Volleyball Team.

# ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

Appointed every two years.

# ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Diana Mancinelli

18451 N.W. 9th St.

Pembroke Pines, Fl 33029

# ARTICLE VI INCORPORATOR

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

Patricia Miller

1181 N.W. 184 Way

Pembroke Pines, Fl 33029

Signature/Incorporator

Date

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 obligations of my position as registered agent.

L. Long T. Pancine VI.
Signature /Registered Agent