

N05000009697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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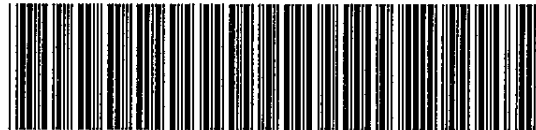
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/01/05--01010--002 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
05 SEP 16 PM 4:09

N05-41243

Brown SEP 20 2005



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

September 2, 2005

JOHN FLEISCHACKER
C/O CITY NATIONAL BANK
25 WEST FLAGLER STREET
MIAMI, FL 33130

SUBJECT: RMA MIAMI-DADE CHAPTER NON PROFIT CORP
Ref. Number: W05000041243

We have received your document for RMA MIAMI-DADE CHAPTER NON PROFIT CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation. ✓

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address. ✓

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address. ✓

You need to delete Non Profit from the corporation name. You need to complete the addresses of the officers and Article VII needs to be completed with name and address of the incorporator., ✓

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6972.

Doris Brown
Document Specialist
New Filings Section

Letter Number: 805A00055247

COVER LETTER

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

SUBJECT: RMA Miami Dade Chapter Corporation
(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: John J Fleischacker
Name (Printed or typed)

C/O City National Bank
Address

25 W Flagler Street, Miami Florida 33130
City, State & Zip

305 577 7442
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)

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DIVISION OF CORPORATION
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ARTICLE I NAME

The name of the corporation shall be:

RMA Miami Dade Chapter Corporation

ARTICLE II PRINCIPAL OFFICE

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

Miami Florida C/O John Fleischacker/City National Bank 25 W Flagler Street Miami Florida 33130

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Set of a Chapter of the Risk Management Association, (RMA), an organization headquartered in Philadelphia. This organization primarily furnishes information and conducts seminars and conferences for Bankers.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Elected at an annual meeting

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Maxine Kaplan, President C/O Regions Bank 2800 Ponce De Leon Blvd Coral Gables Fla 33134

Jerry Weisman, Vice Pres C/O Community Bank of Florida 28801 S.W. 157th Ave Homestead, Florida 33033

Ronald Ploude Secretary, Mellon United Bank 1111 Brickell Ave, Miami Florida 33131

John Fleischacker, Treasurer, C/O City National Bank 25 W Flagler Street, Miami Fla 33130

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

John Fleischacker, Treasurer, C/O City National Bank, 25 W Flagler Street, Miami, Florida

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Eileen Rodriguez, C/O Wachovia Bank N/A 200 South Biscayne Blvd Miami Fla 33131

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

9/14/05.

Date



Signature/Incorporator

September 12, 2005

Date