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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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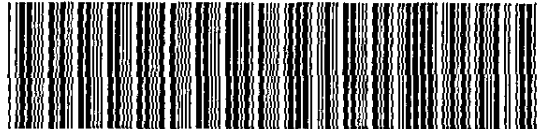
(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: Dante Alighieri Italian Cultural 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: Dr. M. Giovannella Moscovici
Name (Printed or typed)

8049 NW 27th Blvd.
Address

Gainesville, FL 32606
City, State & Zip

352-378-3939
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:

Dante Alighieri Italian Cultural Society Inc.

ARTICLE II PRINCIPAL OFFICE

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

8049 NW 27th Blvd., Gainesville, FL 32606

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide a forum for the presentation and discussion of issues related to the Italian language, culture, history, and literature.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors shall be elected on an annual basis. All active members shall have a vote. Elections will be held in January of each year.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Dr. M. Giovannella Moscovici, 8049 NW 27th Blvd., Gainesville, FL 32606, president
Sherrie Nunn, 2306 SW 13th St. #311, Gainesville, FL 32608, vice-president and treasurer
Marina Terracciano, 1636 NW 57th St., Gainesville, FL 32605, secretary

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Dr. M. Giovannella Moscovici, 8049 NW 27th Blvd., Gainesville, FL 32606

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dr. M. Giovannella Moscovici, 8049 NW 27th Blvd., Gainesville, FL 32606

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.

Dr. M. Moscovici
Signature/Registered Agent

11/14/05
Date

Dr. M. Moscovici
Signature/Incorporator

11/14/05
Date

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NOV 16 AM 04:47
CLERK OF CIRCUIT COURT
FLORIDA