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#### **COVER LETTER**

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

SUBJECT: South Brevard Mothers of Multiples, Inc.					
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
: Enclosed is an original an	nd one(1) copy of the Artic	les of Incorporation and a	a check for :		
\$70.00	\$78.75	\$78.75	☐ \$87.50		
Filing Fee	Filing Fee & Certificate of	Filing Fee & Certified Copy	Filing Fee, Certified Copy		
	Status	ac commed copy	& Certificate		
		ADDITIONAL CO	PY REQUIRED		
FROM:	South Brevard Mothers Name (Pri	s Of Multiples, Inc	-		

PO Box 3251

(321) 751-9985

Melbourne, FL 32902-3251

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

Daytime Telephone number

Address

City, State & Zip



# FLORIDA DEPARTMENT OF STATE Division of Corporations

November 13, 2006

SOUTH BREVARD MOTHERS OF MULTIPLES, INC. PO BOX 3251
MELBOURNE, FL 32902-3251

SUBJECT: SOUTH BREVARD MOTHERS OF MULTIPLES, INC.

Ref. Number: W06000049507

We have received your document for SOUTH BREVARD MOTHERS OF MULTIPLES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2007 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

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) 245-6931.

Letter Number: 806A00066422

Becky McKnight Document Specialist New Filing Section

#### ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ART	TICLE I	NA.	ME

The name of the corporation shall be:

South Brevard Mothers of Multiples, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

First United Methodist Church, Life Enrichment Center 110 E. New Haven Ave. Melbourne, FL 32901

Malling Address: PO Box 3251 Melbourne, FL 32902-3251

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide mothers of multiples with support and information. To act as a social, civic, and support group for members. To make available to the members any material available concerning multiples.

#### ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors and Officers are nominated and voted on by the membership in June of each year and installed as Directors and Officers in July of each year.

#### ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Kim Cox-Co-President

Katie Struckman-Co-President/Secretary Brianna Nipper 2120 Stratford Pointe Drive 5364 Creekwood Drive

West Melbourne, Fl. 32904

3130 Lago Vista Drive Melbourne, FL 32940

Tammy Lyons-2nd Vice-President

128 Pelican Drive

Melbourne Beach, FL 32950

Shannan Kozack- 3rd Vice-President

503 Holly Drive

Melbourne, FL 32940

Satellite Beach, FL 32937

Stacey Pelchat- Treasurer 936 Carriage Hill Road

Melbourne, FL 32940

#### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Kim Cox

5364 Creekwood Drive

Melbourne, FL 32940

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Katie Struckman

2120 Stratford Pointe

West Melbourne, FL 32904

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

 $\frac{6/12/67}{\text{Date}}$ 

# Articles of Incorporation of South Brevard Mothers of Multiples

# Article VIII Dissolution

## Section 1. Liabilities

In the event of Dissolution of this organization, the Board of Directors shall make provisions for payment of all liabilities.

### Section 2. **Distribution of Assets**

Distribution of the Clubs remaining assets shall be made to an organization qualifying as a Mothers of Multiples Club, which shall be organized, operated for charitable, educational and scientific purposes. No part of the net income or assets of the Club shall ever inure to the benefit of any director, officer or member or benefit of any private individual. Upon dissolution the outgoing Board of Directors shall select and vote on the receiving Multiples organization.