

N09000004484

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

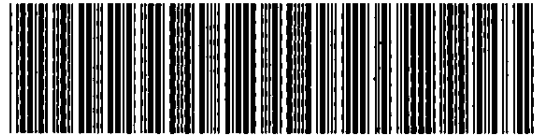
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 MAY -6 PM 2:10

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AND  
FILED

## COVER LETTER

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

SUBJECT: AMERICAN LEGION AUXILIARY, EVERGLADES UNIT 20, 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: ANDREA MAROTTA  
Name (Printed or typed)

E ESPERANZA AVE  
Address

CLEWISTON FL 33440  
City, State & Zip

863-983-7214  
Daytime Telephone number

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

**AMERICAN LEGION AUXILIARY, EVERGLADES UNIT 20, INC.**

**ARTICLES OF INCORPORATION**

Articles of Incorporation of the undersigned, civilian organization of women citizens of the United States, desiring to form a Non-Profit Corporation under the Non-Profit Corporation Law of Florida, do hereby certify:

**FIRST:** The name of the Corporation shall be American Legion Auxiliary, Everglades Unit 20, Inc.

**SECOND:** The place in this state where the principal office of the Corporation is to be located 101 SW Ave D, Belle Glade FL 33430, Palm Beach County.

**THIRD:** Said Corporation is organized exclusively for charitable and educational purposes, to participate and contribute to the accomplishments of the aims and purposes of the American Legion; to inculcate a sense of individual obligation to the community, including for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501 © (3) of the Internal Revenue Code; or the corresponding section of any future federal tax code.

**FOURTH:** The names, title and address of the persons who are the Initial Directors and/or Officers of the corporation are as follows:

Theresa Matthews, President – 2176 E Main St, Pahokee FL 33476  
Andrea Marotta, Secretary – 518 E Esperanza Ave, Clewiston FL 33440  
Brenda Spooner, Vice President – PO Box 999, Belle Glade FL 33430

These Directors/Officers of the American Legion Auxiliary, Everglades Unit 20, Inc. are elected as stated and in accordance with the bylaws of this Corporation.

**FIFTH:** No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distribution in furtherance of the purposes set forth in the Third Article hereof. Said corporation shall be absolutely non-political and shall not be used for the dissemination of partisan principles nor for the promotion of the candidacy of any person seeking public office or preferment. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501 (c) (3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

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SECRETARY OF STATE

**SIXTH:** The Initial Registered Agent of this Corporation shall be:  
Andrea Marotta – 518 E Esperanza Ave, Clewiston FL 33440

**SEVENTH:** The Incorporator of this Corporation is:  
Theresa Matthews – 2176 E Main St, Pahokee FL 33476

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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.

Andrea Marotta  
Signature/Registered Agent

4/20/09  
Date

Theresa Matthews  
Signature/Incorporator

4-20-09  
Date

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AND  
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TALLAHASSEE, FLORIDA