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COVER LETTER

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

SUBJECT: MCHS GIRLS SOCRE BOOSLER CLUB IN C.
(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 ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate PY REQUIRED
FROM: Alicia Danguily Name (Printed or typed) Hazy SW Rivers END Way Address			
Palm City, FL 34990 City, State & Zip			
Daytime Telephone number			
E-mail address: (to be used for future annual report notification)			

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

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ARTICLES OF INCORPORATION

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

. ARTICLE I

NAME

The name of the corporation shall be:

The name of the corporation shall be: MCHS Girls Soccer	Boosler Club inc.
ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 2801 S. Kanner Hwy Start, FL 34994 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	nailing POBOX 1197 Palm City, FL 34991
* To Support i promote and maintain a high of Sportsmanship in high School girls soco coaches programs by fundraising do	and the same of th
ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected or appointed:	and alocated but
The Drector is to be nomined board members and officers	ated and elected by
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS List name(s), address(es) and specific title(s): Director President: Alicia Sanguily: Secretary: Rita Knapper 3517 SW Treasurer: Debbie Braden 221e3 ARTICLE VI INITIAL REGISTERED AGENT AND STRE. The name and Florida street address (P.O. Box NOT acceptable) of Alicia Sanguily 4224 SW Rivers END Palm City Fl. 34990 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Alicia Sanguily 4224 SW Rivers END Palm City Fl. 34990 ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	Meadowbroke Rd Swart, FL 34997 ET ADDRESS The registered agent is: AND
Having been named as registered agent to accept service of process for the above in this certificate, I am familiar with and accept the appointment as registered to	
Signature/Registered Agent	7 - 28 - 09 Date
Signature/Incorporator	<u> </u>