

N180000004226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

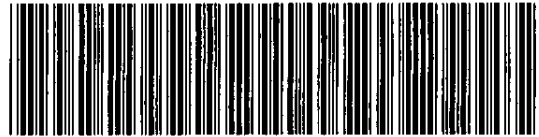
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/08/10--01025--008 **78.75

FILED
2010 APR 26 A 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-29-10
01-68-1
17444
cc

COVER LETTER

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

SUBJECT: Families Against Murder And Accidental Shootings
(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: Lela Coley
Name (Printed or typed)

1730 N.W. 5th Ave
Address

Pompano Beach, FL 33060
City, State & Zip

954-9436945
Daytime Telephone number

coylelela@bellsouth.net
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 9, 2010

LELA COLEY
1730 NW 5TH AVE.
POMPANO BCH, FL 33060

SUBJECT: FAMILIES AGAINST MURDER AND ACCIDENTAL SHOOTINGS
Ref. Number: W10000017446

We have received your document for FAMILIES AGAINST MURDER AND ACCIDENTAL SHOOTINGS 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 name must contain a word that will clearly indicate that it is a corporation. This word 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.

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.

Please complete the principal and mailing address, and also list your name and address in the appropriate section as registered agent and incorporator.

Please return the corrected 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) 245-6995.

Wanda Cunningham
Regulatory Specialist II
New Filing Section

Letter Number: 010A00008761

RECEIVED
10 APR 23 PM 4:50
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
1730 NW 5TH AVE
POMPANO BEACH, FL 33060

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

ARTICLE I NAME

The name of the corporation shall be:

Families Against Murder And Accidental Shootings, *INC*

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different

1730 N.W. 5th Ave. Mailing Address Box 1252 *Pompano Bch, FL*
Pompano Bch, FL 33060 *mailing Zip code 33061*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To establish awareness and memorialize victims of murder across the State of Florida, and to assist, in a small way financially, students attending college and high school graduates.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Consultation/agreement to serve and character search.

As Stated in the Bylaws

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Coley, Lela
1730 NW 5th Ave.
Mailing Address: Box 1252
Pompano Beach, FL 33061 US

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

* 1730 NW 5th Ave
Pompano Beach, FL 33060

* *Lela Coley*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Coley, Lela
1730 n.w. 5th Ave,

Pompano Beach, FL 33060 Mailing Box 1252 - 33061

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.

Lela Coley

Signature/Registered Agent

3-10-10
Date

Lela Coley

Signature/Incorporator

3-10-10 lela
Date

FILED
2010 APR 26 A 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA