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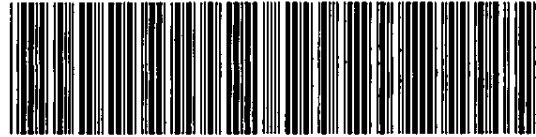
(Business Entity Name)

(Document Number)

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SEC. OF STATE
TALLAHASSEE, FLORIDA

W16-24421



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 19, 2010

NIKO9L ANDERSON
912TH HRC KAF
APO, AE 09355, XX

SUBJECT: SIBLINGS AND FRIENDS OF MURDER VICTIMS (SAFOMV)
Ref. Number: W10000024427

We have received your document for SIBLINGS AND FRIENDS OF MURDER VICTIMS (SAFOMV) and your check(s) totaling \$87.50. 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.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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) 245-6929.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 010A00012661

COVER LETTER

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

SUBJECT: Siblings and Friends of Murder Victims
(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: Nikol L. Anderson
Name (Printed or typed)

912th HRC KAF
Address

APO, AE 09355
City, State & Zip

DSN 318-841-1707
Daytime Telephone number

msnikol7352@yahoo.com
E-mail address: (to be used for future annual report notification)

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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:

Siblings and Friends of Murder Victims, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

912th HRC KAF 19020 NW 21st ave
temp APO, AE 09355 Miami, FL 33056

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Support group and community organization tailored to meet the needs of siblings and friends of murder victims. Organization hopes to raise money for scholarships and donations to grieving families.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Letter of intent for open position will be petitioned and reviewed annually. Members of SafoMV's will then vote for candidate. In the event no petition for position is received current president will appoint or decide if position is vital to mission. All decisions will be filed by secretary for board members review.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Nikol L. Anderson - President / Treasurer 912th HRC KAF APO, AE 09355
Nichelle L. Anderson - Vice President 19020 NW 21st ave Miami, FL 33056
Veronica L. Green - Secretary same as above
Deirdre T. Anderson - Chairman of Board Same as above

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Nikol L. Anderson
19020 NW 21st ave
Miami FL 33056

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Nikol L. Anderson
912th HRC KAF
APO, AE 09355

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

Date

1 May 10

Signature/Incorporator

Date

1 May 10

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TALLAHASSEE, FLORIDA