

N11000001424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

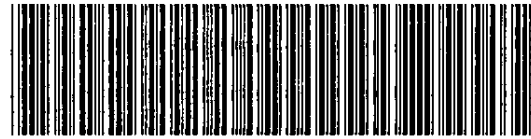
(Business Entity Name)

(Document Number)

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FEB 8 2011  
11:00 AM  
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FEB - 8 PM 3:58

PS 2/10/11

## COVER LETTER

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

SUBJECT: BAIN SPECIALISTS FOUNDATION, 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: Sharon A. Reid  
Name (Printed or typed)

P. O. Box 16494  
Address

Ft. Lauderdale, FL 33318  
City, State & Zip

954 309 3889  
3627 W. Broward Blvd. phone number

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

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

OK  
4063

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

**ARTICLE I NAME** **BAIN SPECIALISTS FOUNDATION, INC.**

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
3627 W. Broward Blvd  
Ft. Lauderdale, FL 33312

Mailing address, if different is:  
P. O. Box 16494  
Ft. Lauderdale, FL 33318

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose for which this corporation is created and maintained shall be exclusively for the promotion of economic and social welfare development, nationally and internationally.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed:

The initial members of the corporation shall be appointed and going forward, all directors will be nominated and elected.

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

Name and Title: Sharon A. Reid, President/CEO  
Address: 3627 W. Broward Blvd  
Ft. Lauderdale, FL 33312

Name and Title: Ken Marc, DVP  
Address: 3627 W. Broward Blvd  
Ft. Lauderdale, FL 33312

Name and Title: Paola Tovar, DVP  
Address: 3627 W. Broward Blvd  
Ft. Lauderdale, FL 33312

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: Alston Golding, DVP  
Address: 3627 W. Broward Blvd  
Ft. Lauderdale, FL 33312

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

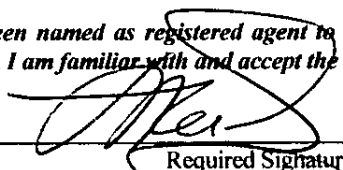
Name: Sharon A. Reid  
Address: 5510 Pacific Blvd, #102  
Boca Raton, FL 33433

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Sharon A. Reid  
Address: 5510 Pacific Blvd, #102  
Boca Raton, FL 33433

*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*

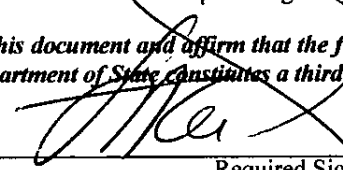


Required Signature of Registered Agent

1/31/11

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*



Required Signature of Incorporator

1/31/11

Date

FILED  
11 FEB - 8 PM 3:58  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA