

N11000004786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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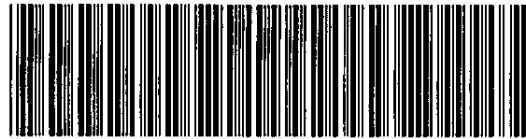
(Business Entity Name)

(Document Number)

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11 MAY 13 PM 3:54
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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Marymount High School Alumnae Association, 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 P. Darlington
Name (Printed or typed)

6543 NW 16th st
Address

Margate, FL 33063
City, State & Zip

954-288-3853
Daytime Telephone number

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

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: **Marymount High School Alumnae Association, INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6543 NW 16th st
Margate, FL 33063

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To promote the interest of Marymount High School in Jamaica West Indies and those who attended the institution. Also to engage in fund raising activities to obtain the means to assist needy students and special projects at Marymount High School in Jamaica West Indies, and deserving local charities in the USA.

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

Directors are elected by voting from members of the organization.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andrea P. Darlington - President

Name and Title: _____

Address: 6543 NW 16th St
Margate, FL 33063

Address: _____

Name and Title: Beverly Gillette-Anderson - Vice President

Name and Title: _____

Address: 6543 NW 16th St
Margate, FL 33063

Address: _____

Name and Title: Sherryl Boothe-Delisser - Treasurer

Name and Title: _____

Address: 6543 NW 16th St
Margate, FL 33063

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Andrea P Darlington

Address: 6543 NW 16th St
Margate, FL 33063

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Wayne C. Grant

Address: 2331 N. State Road 7
Suite 212
Lauderhill, FL 33313

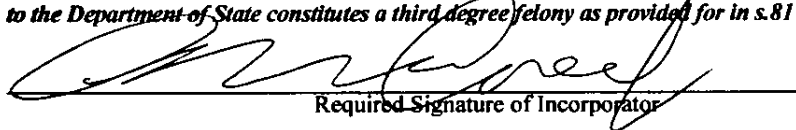
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature of Registered Agent

5/10/2011
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

5-10-11
Date

11 MAY 13 PM 3:54
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA