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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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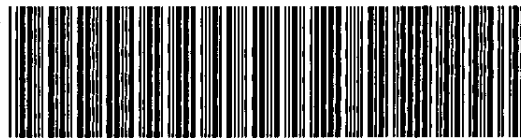
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers NOV 02 2011

COVER LETTER

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

SUBJECT: **SEMINOLE BAND BOOSTER 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: **JOANNE WRIGHT**

Name (Printed or typed)

6200 SW 16 ST

Address

PLANTATION FL 33317

City, State & Zip

954-303-1139

6200 SW 16 ST Telephone number

SEMINOLEMIDDLEBAND@GMAIL.COM

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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



10/21/2011

To Whom It May Concern:

My name is Joanne Wright I am Secretary of the Band Booster at Seminole Middle School, we are a parent volunteer group that raises funds to support the Seminole Middle School Band. We had previously registered an LLC – Seminole Band Booster Inc., doc # P07000106099.

A decision at the General meeting was to deactivate the registered LLC and file a not for profit organization as all funds raised are donations and given to the school. We have no intention of reactivating or reinstating the LLC as we need the name for our not for profit organization. Please authorize the name Seminole Band Booster be assigned to our new filing, please see the attached.

Thank you for your consideration
Yours Sincerely

Joanne Wright
Secretary
Seminole Band Booster
6200 SW 16 St
Plantation FL 33317

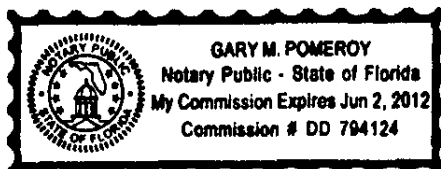
Tel: (954) 303-1139
Email: seminolemiddleband@gmail.com
Website: www.seminoleband.com

STATE OF FLORIDA

COUNTY OF BROWARD

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The foregoing instrument was acknowledged before me this 21 day of OCTOBER, 2011,
by Joanne Wright, who is personally known to me or who has produced FLORIDA DRIVERS LICENSE
as identification.


Signature of Notary

(seal)

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: SEMINOLE BAND BOOSTER INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
6200 SW 16 ST
PLANTATION FL 33317

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE OBJECTIVE OF THE SEMINOLE BAND BOOSTER IS TO RAISE FUNDS TO SUPPORT THE MIDDLE SCHOOL BAND PROGRAM AND TO GIVE PARENT VOLUNTEERS A PLATFORM IN WHICH TO BE INVOLVED AND SUPPORT THE SEMINOLE MIDDLE SCHOOL BAND OBJECTIVES

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

Officers are elected at the general meeting.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HEIDI ELIASOV-HODES - PRESIDENT
Address: 941 COCO PLUM WAY
PLANTATION FL 33324

Name and Title: JANET SEKOSAN - VICE PRESIDENT
Address: 1040 E. TROPICAL WAY
PLANTATION FL 33317

Name and Title: JOANNE WRIGHT - SECRETARY
Address: 222 SW 63 AVENUE
PLANTATION FL 33317

Name and Title: ALINA LEVANTI - TREASURER
Address: 5900 SW 16 ST
PLANTATION FL 33317

Name and Title:
Address:

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: JOANNE WRIGHT
Address: 6200 SW 16 ST
PLANTATION FL 33317

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOANNE WRIGHT
Address: 6200 SW 16 ST
PLANTATION FL 33317

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

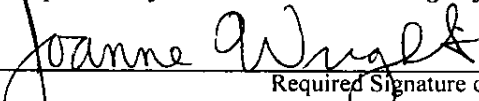


Required Signature of Registered Agent

10/21/2011

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

10/21/2011

Date

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