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COVER LETTER

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

SUBJECT: MICH	nael Solich Be	nefit Fund,	Inc.			
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)						
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 CO	OPY REQUIRED			
FROM: Catherine Solich Name (Printed or typed)						
829 SW 15th Ave Address						

m Solich fund@aol.com E-mail address: (to be used for future annual report notification)

239 - 574 - 4219 Daytime Telephone number

Cape Coral FL 33991
City, State & Zip

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 co	rporation shall be: Michael Solich	Benefit Fund INC.
ARTICLE II	Principal office Principal street address 829 SW 15th Ave Cape Coral, Fl 33991	Mailing address, if different is:
ARTICLE III The purpose for w	PURPOSE hich the corporation is organized is: Educo	thonal foundation fund
ARTICLE IV	MANNER OF ELECTION The manner in S+2	which the directors are elected and appointed: Shall be as ated in the bylaws.
Name and Ti Address:	itle: Catherine Solich Director Fag Sw 15th Ave Cape Coral, FL 33991	Name and Title: Robert Ball Address: 4754 Woodstock Rd St. James City, Fl 33956
Name and Ti Address:	1410 SW 13+ Et Cape Coral, A. 33991	Name and Title: Mark Solich Address: 8.30 SW 3rd Capc Coral, Ft 33991
Name and Ti Address:	Cape Coral Player 33991	Name and Title: JACOB Meyer Address: 2221 SW 219 Ter Cape Corol FL 33991
ARTICLE VI	REGISTERED AGENT	
	rida street address (P.O. Box NOT acceptable) of	f the registered agent is:
Name: Address:	Catherine Solich 829 SW 15th Ave Cape Coral, FL 33991	- 12 FEB
A DATA CONTRACT	717000001700	
The name and add	INCORPORATOR Iress of the Incorporator is:	
Name:	Catherine Solich	
Address:	829 SW 15th Aux Cape Coral, FL 33991	5: 0t
certificate, I am fai	miliar with and accept the appointment as register	ess for the above stated corporation at the place designated in thi red agent and agree to act in this capacity
(nthe	Line Solial	2/10/12
	Required Signature of Registered Agent	Date
I submit this docum		rue. I am aware that any faise information submitted in a documen ied for in s.817.155. F.S.
Pau.	· P / · .	
_ when	Required Signature of Incorporator	2/10/12 Date

Article VIII: Purposed Clause: Said corporation is organized exclusively for charitable and educational purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

Article IX: Disolution of Assests: Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

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