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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/4

COVER LETTER

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

SUBJECT: Temp Bon Dieu, 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: Ranexte Dorcely

Name (Printed or typed)

3749 sw janus st

Address

Port st lucie, Fl 34953

City, State & Zip

772-209-1343

3749 sw janus st Phone number

ranextedorcely@yahoo.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

Temp Bon Dieu, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
3749 sw Janus st
Port st lucie, Fl 34953

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Religious, Educational, Culture, Social, Charitable and Sports activities for young people in the community

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:
Through vote of the participating members.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ranexte Dorcely (President)
Address: 3749 sw Janus st
Port st lucie, Fl 34953

Name and Title: Bossuet lormeus (Treasurer)
Address: 3749 sw Janus st
Port st lucie, Fl 34953

Name and Title: Illianese Dorcely (Vice President)
Address: 3749 sw Janus st
Port st lucie, Fl 34953

Name and Title: _____
Address: _____

Name and Title: Annrosette Dorcely (Secretary)
Address: 3749 sw Janus st
Port st lucie, Fl 34953

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: Ranexte Dorcely
Address: 3749 sw Janus st
Port st lucie, Fl 34953

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ranexte Dorcely
Address: 3749 sw Janus st
Port st lucie, Fl 34953

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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

Ranexte Dorcely
Required Signature of Registered Agent

6-9-2012
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.

Ranexte Dorcely
Required Signature of Incorporator

6-9-2012
Date