

N13000001619

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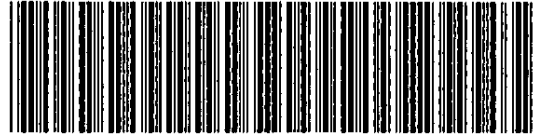
Certificates of Status _____

Special Instructions to Filing Officer:

CORRECTED ARTICLE IV
(MANNER) TO READ
"APPOINTED" PER TELEPHONE
CONVERSATION WITH
JOHN G. KANE.

K 02/19/13

Office Use Only



200244075102

01/28/13--01019--020 **87.50

FILED

13 FEB 18 AM 10:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W13-5691

K 02/19/13

RECEIVED

13 FEB 19 AM 10:20

RECEIVED
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2013

JOHN G. KANE
1799 S.E. 17TH ST.
FORT LAUDERDALE, FL 33316

SUBJECT: ART INSTITUTE OF FORT LAUDERDALE CULINARY FACULTY
AND STUDENT CLUB INC.
Ref. Number: W13000005691

We have received your document for ART INSTITUTE OF FORT LAUDERDALE CULINARY FACULTY AND STUDENT CLUB INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Section 617.0803, Florida Statutes, requires that the board of directors never have fewer than three directors.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 413A00002245

COVER LETTER

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

SUBJECT: Art Institute of Fort Lauderdale Culinary Faculty and Student Club 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: John G. Kane
Name (Printed or typed)

1799 S.E. 17th St.
Address

Fort Lauderdale, FL 33316
City, State & Zip

954 308 2639
Daytime Telephone number

jgkane@aia.edu
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: Art Institute of Fort Lauderdale Culinary Faculty & Student Club inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1799 S.E. 17th St

Mailing address, if different is:

Fort Laurdedale, FL 33316

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose for which the corporation is organized is
to provide opportunities of educational development, network and community support,
for the students enrolled in the Art Institute of Fort Lauderdale and the culinary department faculty.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: _____
will be appointed _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John G. Kane, President

Name and Title: Kathy Deaner, Sareat at Arms

Address: 1799 S.E. 17th St
Fort Laurderdale, FL 33316

Address: 1799 S.E. 17th St
Fort Lauderdale, FL 33316

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 FEB 18 AM 10:34

FILED

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: John G. Kane

Address: 1799 S.E. 17th St.

Fort Lauderdale, FL 33316

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Marcela M. Guzman

Address: 1799 S.E. 17th St.

Fort Lauderdale, FL 33316

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

John Kane
Required Signature of Registered Agent

2/11/13
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.

Marcela M. Guzman
Required Signature of Incorporator

Feb. 17, 2013
Date