## N14000004261

| (Requestor's Name)   |
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| (Address)  |
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| (City/State/Zip/Phone #)   |
| (City, State Lip), the state of |
| PICK-UP WAIT MAIL  |
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| (Business Entity Name)   |
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| (Document Number)  |
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| Certified Copies Certificates of Status  |
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| Special Instructions to Filing Officer:  |
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Office Use Only



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SECRETARY OF STATE
ALLAHASSEE FLORIDA

W7-14070

## **COVER LETTER**

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

SUBJECT: Kappa Foundation of Delray Beach, 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
Filing Fee & Certificate of Status

□ \$78.75
Filing Fee & Filing Fee, & Certified Copy & Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM:

David Wiggins

Name (Printed or typed)

3423 Sonoma Drive

Address

West Palm Beach, Florida 33404

City, State & Zip

313-575-3381

Daytime Telephone number

david.alan.wiggins@gmail.com

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

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

14 MAY -2 AM II: 02

SEURE IA
TALLAHASSEE, FLORIDA

March 4, 2014

DAVID WIGGINS 3423 SOMONA DR WEST PALM BEACH, FL 33404

SUBJECT: KAPPA FOUNDATION OF DELRAY BEACH, INC.

18

Ref. Number: W14000014070

We have received your document for KAPPA FOUNDATION OF DELRAY BEACH, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Please return 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.

Jessica A Fason Regulatory Specialist II

Letter Number: 714A00004753

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

ARTICLE I

| TICLE   | II PRINCIPAL OFFICE   |   |  |
|---|---|---|--|
| <u>11</u>   | Principal street address: 22 NW 2ND AVENUE  |   | Mailing address, if different is:  |
| D   | ELRAY BEACH, FL 334   | 444   |  |
|   | for which the corporation is organized is:  |   | OLARSHIPS TO DESERVING GRADUATES   |
|   |   |   |  |
|   |   |   |  |
|   |   |   |  |
| E ELEC  | TED BI-ANNUALLY BY THE BOARD OF   | DIRECTORS A   | e directors are elected and appointed:   |
| e elec<br>Rticle                                    | TED BI-ANNUALLY BY THE BOARD OF  V INITIAL OFFICERS AND/OR DI   | DIRECTORS A   | S PER THE BYLAWS.  HERMAN STEVENS ESO, VICE PRES   |
| E ELEC  | TED BI-ANNUALLY BY THE BOARD OF   | DIRECTORS A   | S PER THE BYLAWS.  HERMAN STEVENS ESO, VICE PRES   |
| E ELEC  | TED BI-ANNUALLY BY THE BOARD OF  V INITIAL OFFICERS AND/OR DI  itle: NATE COLLINS, PRESIDENT  | DIRECTORS A   | e directors are elected and appointed:  S PER THE BYLAWS.  HERMAN STEVENS, ESQ. VICE PRES  |
| E ELEC  | TED BI-ANNUALLY BY THE BOARD OF  V INITIAL OFFICERS AND/OR DI  itle: NATE COLLINS, PRESIDENT  429 N.W. 8TH AVENUE   | DIRECTORS A   | HERMAN STEVENS, ESQ. VICE PRES   |
| E ELEC  | V INITIAL OFFICERS AND/OR DI  ILIC: NATE COLLINS, PRESIDENT 429 N.W. 8TH AVENUE BOYNTON BEACH, FLORIDA 33435  | DIRECTORS A  IRECTORS  Name and Title Address:                          | HERMAN STEVENS, ESQ. VICE PRES  75 S.W. 5TH AVE.  DELRAY BEACH, FL 33444  KENNETH HOWARD, DIRECTOR   |
| TICLE  Tress  The and Tress  The and Tress          | V INITIAL OFFICERS AND/OR DI  ILIC: NATE COLLINS, PRESIDENT 429 N.W. 8TH AVENUE BOYNTON BEACH, FLORIDA 33435  | DIRECTORS A  IRECTORS  Name and Title Address:  Name and Title          | HERMAN STEVENS, ESQ. VICE PRES  75 S.W. 5TH AVE.  DELRAY BEACH, FL 33444  KENNETH HOWARD, DIRECTOR   |
| TICLE  Tress  The and Tress  The and Tress          | ITED BI-ANNUALLY BY THE BOARD OF  V INITIAL OFFICERS AND/OR DI  itle: NATE COLLINS, PRESIDENT  429 N.W. 8TH AVENUE  BOYNTON BEACH, FLORIDA 33435  LARRY THOMAS, SECRETARY/TREASURER                                       | DIRECTORS A  IRECTORS  Name and Title Address:                          | HERMAN STEVENS, ESQ. VICE PRES  75 S.W. 5TH AVE.  DELRAY BEACH, FL 33444  KENNETH HOWARD, DIRECTOR   |
| e ELEC  TICLE  The and Ti  Tress  The and Ti  Tress | INITIAL OFFICERS AND/OR DI  INITIAL OFFICERS AND/OR DI  ILIC: NATE COLLINS, PRESIDENT 429 N.W. 8TH AVENUE BOYNTON BEACH, FLORIDA 33435  ILLE: LARRY THOMAS, SECRETARY/TREASURER 2305 SW 65TH AVE.  DELRAY BEACH, FL 33445 | DIRECTORS A  IRECTORS  Name and Title Address:  Name and Title Address: | HERMAN STEVENS, ESQ. VICE PRES  75 S.W. 5TH AVE.  DELRAY BEACH, FL 33444  KENNETH HOWARD, DIRECTOR:  1122 NW 2ND STREET,  DELRAY BEACH, FL 33444 |
| TICLE   | INITIAL OFFICERS AND/OR DI  INITIAL OFFICERS AND/OR DI  ILIC: NATE COLLINS, PRESIDENT 429 N.W. 8TH AVENUE BOYNTON BEACH, FLORIDA 33435  ILLE: LARRY THOMAS, SECRETARY/TREASURER 2305 SW 65TH AVE.  DELRAY BEACH, FL 33445 | DIRECTORS A  IRECTORS  Name and Title Address:  Name and Title          | HERMAN STEVENS, ESQ. VICE PRES  75 S.W. 5TH AVE.  DELRAY BEACH, FL 33444  KENNETH HOWARD, DIRECTOR:  1122 NW 2ND STREET,  DELRAY BEACH, FL 33444 |

| Name and Title:                         | N  | lame and Title:  |                              |
|---|--|--|------------------------------|
| Address                                 | A  | address:   |                              |
|   |  |  |                              |
| Name and Title:                         |  | lame and Title:  |                              |
| Address                                 | A  | Address:   |                              |
| _                                       |  |  |                              |
| ARTICLE VI                              | REGISTERED AGENT   |  |                              |
| The name and Flo                        | rida street address (P.O. Box NOT acceptal   | ble) of the registered agent is:   |                              |
| Name:                                   | Kenneth Howard   |  |                              |
| Address:                                | 1122 NW 2nd Avene  | <u>u</u>   |                              |
|   | Delray Beach, FL 33444   |  |                              |
| ARTICLE VII                             | INCORPORATOR   |  |                              |
| The name and add                        | Iress of the Incorporator is:  | ·  |                              |
| Name:                                   | David A. Wiggins   |  |                              |
| Address:                                | 3423 Sonoma Drive  |  |                              |
|   | West Palm Beach, FL 3340   | 04   |                              |
| Having been nam<br>certificate, I am fa | ed as registered agent to accept service of miligr with and accept the appointment as re | process for the above stated corporation at the place desig<br>egistered agent and agree to act in this capacity | znated in this               |
| Kennet,                                 | Required Signature of Registered Ag  | $\frac{2-13-14}{D_{atc}}$  |                              |
| I submit this docu                      | went and affirm that the facts stated herein   | are true. I am aware that any false information sufficited u   | a document                   |
| to the Department                       | of State constitutes a third degree felony as p  | provided for in s.817.155, F.S.  | Eu uocument                  |
|   | 192  | 2//3//2  | 0/4                          |
| 7416                                    | Required Signature of Incorpor   |  | <del>2</del> / <sub>10</sub> |
| DAVIT                                   | ) 天. WIGGINS   |  | <u>***</u>                   |
|   |  | A TE   | <u></u>                      |