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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Treasure Coast Jewish Centre, 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: Rabbi Arthur S. Rutberg
Name (Printed or typed)

612 SW Barbuda Bay
Address

Port Saint Lucie, FL 34986
City, State & Zip

772 579 6885
Daytime Telephone number

itsmerabbi@gmail.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

The name of the corporation shall be: Treasure Coast Jewish Centre, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
612 SW Barbuda Bay

Port Saint Lucie, FL 34986-3422

Mailing address, if different:
P.O. Box 12731

Fort Pierce, FL 34979-2731

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: exclusively for religious, educational and charitable purposes
under section 501(c)(3) of the Internal Revenue Code or corresponding section of any future federal tax code.

Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within the
meaning of section 501(c)(3) of the Internal Revenue Code or 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.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: They are nominated
and elected by the members of the organization

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mark Fisher, Director
Address: 151 NW Magnolia Lakes Blvd.
Port Saint Lucie, FL 34986

Name and Title: Philip Rose, Director
Address: 485 NW Dover Court
Port Saint Lucie, FL 34983

Name and Title: Susan Feldman, Director
Address: 210 SE Walsh Terrace
Port Saint Lucie, FL 34983

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: Rabbi Arthur S. Rutberg

Address: 612 SW Barbuda Bay

Port Saint Lucie, FL 34986

ARTICLE VII INCORPORATOR

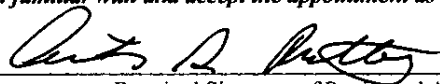
The **name and address** of the Incorporator is:

Name: Rabbi Arthur S. Rutberg

Address: 612 SW Barbuda Bay

Port Saint Lucie, FL 34986

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

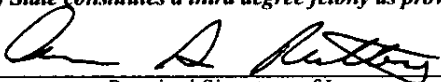


Required Signature of Registered Agent

August 15, 2014

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

August 15, 2014

Date