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(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

(Document Number)

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

g 1/6/16

## COVER LETTER

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

**SUBJECT:** Southeast Credit Union Foundation, 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:** Jeffrey W. Kolhagen  
\_\_\_\_\_  
Name (Printed or typed)

1000 NW 17th Ave.  
\_\_\_\_\_  
Address

Delray Beach, FL 33445  
\_\_\_\_\_  
City, State & Zip

(561) 982 4722  
\_\_\_\_\_  
Daytime Telephone number

jkolhagen@ibmsecu.org

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

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15 DEC 28 PM 2:59  
TALLAHASSEE, FLORIDA  
DIVISION OF STATE  
CORPORATIONS

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



# FLORIDA OFFICE OF FINANCIAL REGULATION

www.FLOFR.com

**DREW J. BREAKSPEAR**  
COMMISSIONER

December 11, 2015

Mr. Jeffrey W. Kolhagen  
1000 NW 17<sup>th</sup> Ave  
Delray Beach, FL 33446

Re: Southeast Credit Union Foundation, Inc.

Dear Mr. Kolhagen:

Reference is made to your recent letter requesting approval to register the above-referenced fictitious name with the Florida Secretary of State for a charitable giving foundation to be opened by IBM Southeast Employee's Credit Union, which is a Florida state-chartered credit union located in Boca Raton, Florida.

Section 655.922, Florida Statutes, exempts a financial institution, holding company or its subsidiaries from the prohibition of using the word "bank," "banco," "banque," "banker," "banking," "trust company," "savings and loan association," "savings bank," or "credit union," or words of similar import, in any context or in any manner in its corporate name. Therefore, this Office will not object to the use of the above referenced name being registered to transact business in the state of Florida. However, this correspondence is not intended to grant the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

A handwritten signature in black ink, appearing to read "JWS", is placed over the typed name of the Acting Director.

Jeremy W. Smith  
Acting Director  
Division of Financial Institutions

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15 DEC 28 PM 2:59  
OFFICE OF STATE  
SECRETARY  
TALLAHASSEE, FLORIDA

JWS:dlb

cc: Lyn Shoffstall, Chief, Bureau of Commercial Recordings, Division of Corporations,  
Department of State



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

15 DEC 28 PM 4:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

November 30, 2015

JEFFREY W. KOLHAGEN  
1000 NW 17TH AVENUE  
DELRAY BEACH, FL 33445

SUBJECT: SOUTHEAST CREDIT UNION FOUNDATION, INC.  
Ref. Number: W15000077187

*Sent completed  
form, along with  
Articles of Incorporation  
(attached)*

We have received your document for SOUTHEAST CREDIT UNION FOUNDATION, 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):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Claretha Golden

15 DEC 28 PM 2:59  
FILED  
OFFICE OF THE SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Regulatory Specialist II  
New Filing Section

Letter Number: 115A00024991

EFFECTIVE DATE 01/01/16

ARTICLES OF INCORPORATION

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be: Southeast Credit Union Foundation, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

1000 NW 17th Ave.

Delray Beach, FL 33445

Mailing address, if different is:

N/A

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To operate exclusively for charitable purposes within the meaning of Section 501(c) (3) of the Internal Revenue

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed:

Provided in the Bylaws of the Corporation.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Michael L. Miller, President

Address

1000 NW 17th Ave.

Delray Beach, FL 33445

Name and Title: Johnny Bennett, Director

Address:

1000 NW 17th Ave.

Delray Beach, FL 33445

Name and Title: Michael W. Townsend, Secretary/Treasurer

Address

1000 NW 17th Ave.

Delray Beach, FL 33445

Name and Title: N/A

Address:

Name and Title: James M. Dorman, Director

Address

1000 NW 17th Ave.

Delray Beach, FL 33445

Name and Title: N/A

Address:

Name and Title: <u>N/A</u>	Name and Title: <u>N/A</u>
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: <u>N/A</u>	Name and Title: <u>N/A</u>
Address: _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

Name: Michael L. Miller, President

Address: 1000 NW 17th Ave

Delray Beach, FL 33445

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 DEPT OF STATE  
 TALLAHASSEE, FL 32304

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jeffrey W. Kolhagen

Address: 1000 NW 17th Ave

Delray Beach, FL 33445


**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 01/01/2016. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

11/5/2015  
 \_\_\_\_\_  
 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

11/5/2015  
 \_\_\_\_\_  
 Date