

n16000007054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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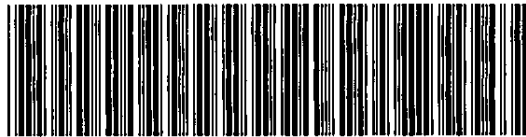
Certificates of Status \_\_\_\_\_

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T. SCOTT



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## COVER LETTER

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

**SUBJECT:** Pride Parents, 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:** Jeffery Via

Name (Printed or typed)

4997 Cromeey Road

Address

North Port, FL 34288

City, State & Zip

941-416-7076

Daytime Telephone number

jvia09@comcast.net

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: Pride Parents, Inc.

### **ARTICLE II – PRINCIPAL OFFICE**

Principal street address: 4997 Cromey Road, North Port, FL 34288

### **ARTICLE III – PURPOSE**

Pride Parents, Inc. is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

The Specific purposes for which this corporation is organized include, but are not limited to: charitable and educational purposes, for such purposes, fundraising for North Port High School Boys' Varsity Basketball team. Funds will be used for, but not limited to, purchasing sports equipment, uniforms and related items, camps, tournaments and clinics and traveling to said camps, tournaments and clinics.

Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the 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. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

### **ARTICLE IV – MANNER OF ELECTION**

The manner in which the directors are elected and appointed: Volunteer

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

Name and Title: Jeffery Via, Director  
Address: 4997 Cromey Road  
North Port, FL 34288

Name and Title: Tammy Baker, Director  
Address: 5165 Janus Avenue  
North Port, FL 34288

Name and Title: Teresa Ramirez, Director  
Address: 5710 Sylvania Avenue  
North Port, FL 34281

### **ARTICLE VI – REGISTERED AGENT**

Name: Jeffery Via  
Address: 4997 Cromey Road  
North Port, FL 34288

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**ARTICLE VII – INCORPORATOR**

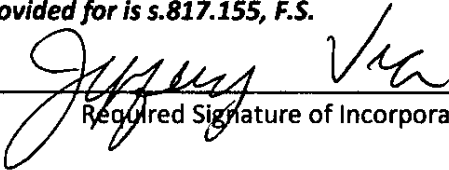
Name: Jeffery Via  
Address: 4997 Cromey Road  
North Port, FL 34288

***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

7-6-2016  
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 is s.817.155, F.S.***

  
\_\_\_\_\_  
Required Signature of Incorporator

7-6-2016  
Date