

'AUG 1 2016'

S. GILBERT

COVER LETTER

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

SUBJECT: Mu Gamma Zeta Chapter of Zeta Phi Beta Sorority, 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: Chemika Burkhalter

Name (Printed or typed)

12734 SW 204th Street

Address

Miami, Florida 33177

City, State & Zip

904-333-9925

Daytime Telephone number

cjr8747@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: Mu Gamma Zeta of Zeta Phi Beta Sorority, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
12734 SW 204th Street

Miami, Florida 33177

Mailing address, if different is:
P.O. Box 343594

Florida City, Florida 33034

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: for a group of college women binding themselves together for the purposes of
promoting the cause of education by encouraging the highest standards of scholarship through scientific, literary, cultural, and
educational programs; promoting charitable projects on college campuses and within the community; fostering the spirit of sisterly
love and promoting the ideal of Finer Womanhood.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Voted by the chapter.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Chemika Burkhalter, President

Address: 12734 SW 204th Street
Miami, Florida 33177

Name and Title: Mary Smith, Vice President

Address: 12021 SW 174th Street
Miami, Florida 33177

Name and Title: Tameshia Sexton, Treasurer

Address: 11625 Pinkston Drive
Miami, Florida 33176

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: Chemika Burkhalter
Address: 12734 SW 204th Street
Miami, Florida 33177

ARTICLE VII INCORPORATOR

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

Name: Chemika Burkhalter
Address: 12734 SW 204th Street
Miami, Florida 33177

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

Chemika Burkhalter
Required Signature of Registered Agent

7/21/16
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.

Chemika Burkhalter
Required Signature of Incorporator

7/21/16
Date