

N16000008680

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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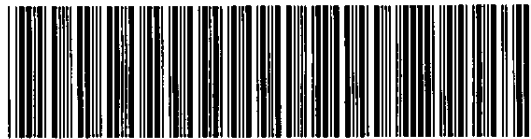
(Business Entity Name)

(Document Number)

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COVER LETTER

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

Butuan Doctors' College Nurses Association, Inc.

SUBJECT: _____
(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: Violeta Yu West

Name (Printed or typed)

11202 Monument Landing Blvd

Address

Jacksonville, FL 32225

City, State & Zip

(904) 994-5633

Daytime Telephone number

violetawe@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

Butuan Doctors College Nurses Association, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address:
11202 Monument Landing Blvd, Jacksonville, FL 32225

Mailing address, if different is:

Same as

ARTICLE III PURPOSE

Preserve the positive image and welfare of its members. ☐ Order ☒ promote pro
The purpose for which the corporation is organized is:
To unite the BDC nurses from various institutions and specialties all across United States and other countries.

To empower BDC nurses through engagement in various activities in Health Education, Clinical Competence, Nursing Leadership and

To encourage development of BDC nurses through continuing education programs, participation in research, and networking with oth

To actively participate in BDC programs that foster collaborations with other nurses who share a common interest of maintaining high

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

Nomination and win

by majority vote

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Violeta West, President

Address: 11202 Monument Landing Blvd
Jacksonville, FL 32225

Name and Title: Bernadine Sagusay, Vice President

Address: 11202 Monument Landing Blvd
Jacksonville FL 32225

Name and Title: Charito Shetty, Secretary

Address: 11202 Monument Landing Blvd
Jacksonville, FL 32225

Name and Title: Charlina Pacana, Treasurer

Address: 11202 Monument Landing Blvd
Jacksonville FL 32225

Name and Title: Zenaída Guda, Auditor

Address: 11202 Monument Landing
Jacksonville FL 32225

Name and Title: Sheila Maraganas, PRO (Public Relati

Address: 11202 Monument Landing
Jacksonville FL 32225

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: Violeta Yu West
Address: 11202 Monument Landing Blvd
Jacksonville, FL 32225

ARTICLE VII INCORPORATOR

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

Name: Violeta Yu West
Address: 11202 Monument Landing Blvd
Jacksonville, FL 32225

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

VWest

Required Signature of Registered Agent

9-7-16

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.

VWest

Required Signature of Incorporator

9-7-16

Date