

N/6000009091

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

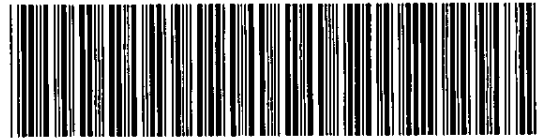
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DIVISION OF CORPORATIONS  
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W/6-029254

09/16/16



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 20, 2016

RENAE PETRY  
1762 S.W. GLORIA LN.  
PORT ST. LUCIE, FL 34953

SUBJECT: BAND OF BROTHERS, M.A., INC  
Ref. Number: W16000029254

We have received your document for BAND OF BROTHERS, M.A., INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

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.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 916A00008157

## COVER LETTER

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

SUBJECT: BAND OF BROTHERS M.A., 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: RENAE PETRY  
Name (Printed or typed)

1762 SW GLORIA LANE  
Address

PORT SAINT LUCIE, FL. 34953  
City, State & Zip

561-723-1921  
Daytime Telephone number

RPETRY914@ATT.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: BAND OF BROTHERS, M.A., INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

Mailing address, if different is:

1762 SW. GLORIA LANE  
PORT SAINT LUCIE, FL.  
34953

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**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: A NON-PROFIT ASSOCIATION  
FOSTERING SUPPORT FOR OTHER CHARITABLE  
ORGANIZATIONS WITHIN THE STATE OF FLORIDA.  
\* SEE ATTACHED \*

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

GENERAL MEMBERSHIP \*SEE ATTACHED\*

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

Name and Title:	<u>PAUL GERTMAN / PRES.</u>	Name and Title:	<u>PASQUALE PRATO, V.P.</u>
Address	<u>501 BACON TERRACE</u>	Address:	<u>11633 S.W. BRISBANE ST.</u>
	<u>PORT SAINT LUCIE, FL.</u>		<u>PORT SAINT LUCIE, FL.</u>
	<u>34953</u>		<u>34984</u>
Name and Title:	<u>RENAE PETRY / SEC.</u>	Name and Title:	<u>JEANNE WOFFORD / TRES.</u>
Address	<u>1762 S.W. GLORIA LANE</u>	Address:	<u>799 SE. SEAHOUSE DR.</u>
	<u>PORT SAINT LUCIE, FL.</u>		<u>PORT SAINT LUCIE, FL.</u>
	<u>34953</u>		<u>34983</u>

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ 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: RENAE PETRY

Address: 1762 SW GLORIA LANE  
PORT SAINT LUCIE, FL. 34953

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: RENAE PETRY

Address: 1762 SW GLORIA LANE  
PORT SAINT LUCIE, FL. 34953

**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*

  
Required Signature of Registered Agent

4/9/16  
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.*

  
Required Signature of Incorporator

4/9/16  
Date

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DIVISION OF CORPORATIONS  
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E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

### Article III Purpose:

A NON-PROFIT ASSOCIATION FOSTERING support for other charitable organizations within the state of Florida. SEVERAL charities that we give donations, participation in their benefits and ORGANIZE BENEFITS for their charity, like Sarah's Kitchen (Feeding the homeless), Twisted Ribbons (helping people with terminal illness), Biker's Chapel Compassion in Action for the homeless.

### Article IV MANNER of Election:

A yearly election is done and voted on by members, as is stated in the bylaws