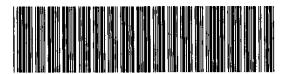
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DELIANASSE TATAS

COVER LETTER

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

SUBJECT: BROWAR	T: BROWARD ASSOCIATION OF SPECIAL EDUCATORS (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)					
Enclosed is an original \$70.00 Filing Fee	and one (1) copy of the Art \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	a check for: \$87.50 Filing Fee, Certified Copy & Certificate			
		ADDITIONAL CO	PY REQUIRED			
FROM	ALAN J. 1	PAOLI, ESQUIRE	_			

Name (Printed or typed)

1720 Harrison Street, Suite 6CW

Address

Hollywood, FL 33020

City, State & Zip

(954) 925-9828

Daytime Telephone number

ALAN@PAOLILAWFL.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)

<u> 4RTICLE II</u>	PRINCIPAL OFFICE			
2824	Principal <u>street</u> address: NW 42nd Avenue	Mailing address, if different is:		
Сосо	nut Creek, FL 33066			
•	PURPOSE r which the corporation is organized is: with special needs.	rovide support an	d assistance to educational professiona	ils who
ARTICI F IV	MANNER OF FLECTION The manner	in which the direc	Elected	annually
	MANNER OF ELECTION The manner INITIAL OFFICERS AND/OR DIRECTO	DRS	tors are elected and appointed:	annually
4RTICLE V	INITIAL OFFICERS AND/OR DIRECTO	DRS	tors are elected and appointed:	annually
ARTICLE IV ARTICLE V Name and Titl	INITIAL OFFICERS AND/OR DIRECTO	DRS	Elected and appointed: Alyson Dudich, VP/Director 10606 NW 81st Street	
ARTICLE V Name and Titl	INITIAL OFFICERS AND/OR DIRECTO Lisa Yurkin, President & Director	ORS Name and Title: Address:	Alyson Dudich, VP/Director 10606 NW 81st Street Tamarac, FL 33321	286 A
ARTICLE V Name and Titl Address	Lisa Yurkin, President & Director 2824 NW 42nd Avenue Coconut Creek, FL 33066	ORS Name and Title: Address:	Alyson Dudich, VP/Director 10606 NW 81st Street Tamarac, FL 33321	717715 St. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ARTICLE V Name and Titl Address Name and Titl	Lisa Yurkin, President & Director 2824 NW 42nd Avenue Coconut Creek, FL 33066	ORS Name and Title: Address: Name and Title:	Alyson Dudich, VP/Director 10606 NW 81st Street Tamarac, FL 33321	2810 NOV -2 AN
ARTICLE V Name and Titl	Lisa Yurkin, President & Director 2824 NW 42nd Avenue Coconut Creek, FL 33066 Danete W. Slipkovich, Secretary/Director	ORS Name and Title: Address:	Alyson Dudich, VP/Director 10606 NW 81st Street Tamarac, FL 33321	2815 NOV -2 A
ARTICLE V Name and Titl Address Name and Titl Address	Elisa Yurkin, President & Director 2824 NW 42nd Avenue Coconut Creek, FL 33066 Danete W. Slipkovich, Secretary/Director 2801 NW 68th Lane	Name and Title: Address: Name and Title: Address:	Alyson Dudich, VP/Director 10606 NW 81st Street Tamarac, FL 33321	2816 NOV -2 AH 9: 30

Name and Title:_		Name and Title:	
Address		Address:	
_			
Name and Title:_		Name and Title:	
Address _		Address:	
-			
	REGISTERED AGENT orida street address (P.O. Box NOT accep	table) of the registered agent is:	
Name:	Alan J. Paoli, Esquire		Ei
Address:	1720 Harrison Street, Suite	6CW	7816 NOV 2187
	Hollywood, FL 33020	> 10 (0) (1)	7-2W
	INCORPORATOR Idress of the Incorporator is: Lisa Yurkin		## / / / / / / / / / / / / / / / / / /
Address:	2824 NW 42nd Avenue		
	Coconut Creek, FL 3306	6	
Effective date, if		(OPTIONAL) d cannot be more than five business days prior or 90 bu	ısiness days
Note: If the date document's effect	e inserted in this block does not meet the ap ctive date on the Department of State's reco	plicable statutory filing requirements, this date will not be rds.	listed as the
		of process for the above stated corporation at the place as registered agent and agree to act in this capacity	
	Required Signature of Registered	Agent Date	> 97 \
I submit this doc to the Departme	cument and affirm that the facts stated here nt of State constitutes a third degree felony	rin are true. I am aware that any false information submitt as provided for in s.817.155, F.S.	ed in a document
~ ()	sa Hur	porator Date	16
	Required Signature of Incor	porator Date	<u> </u>