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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	es of Status
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SECRETARY OF STATE
TALLAHASSEE, FI DADA

COVER LETTER

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

SUBJECT:	ancer Band Booster, Inc.		
	(PROPOSED CORPO	ORATE NAME – <u>MUST IN</u> C	CLUDE SUFFIX)
Enclosed is an original a	nd one (1) copy of the Ar	ticles 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 CO	PY REQUIRED
FROM:	Haleigh Williams		
i KOWI.	Name (Printed or typed)		
	3554 West Orange Country (Club Dr. Suite 140	
		Address	_
	Winter Garden, FL 34787		
		City, State & Zip	_
	407-614-0103		
	Day	time Telephone number	
	southeast@myrenosi.com		

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S. (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be SDSHS Buccaneer Band Booster, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address of the corporation is:

28401 SW 167th Avenue Homestead, FL 33030

ARTICLE III PURPOSE

The specific purpose of the corporation is to support the students, parents, teachers and staff of the Buccaneer band program at South Dade Senior High School by recruiting volunteers, conducting programs, and raising funds. The corporation is organized and will be operated exclusively for charitable and educational purposes within the meaning of 501(c)(3) of the Internal Revenue Code. (All references to sections in these Articles refer to the Internal Revenue Code of 1986 as amended or to comparable sections of subsequent internal revenue laws.) In pursuance of these purposes, it shall do all things necessary, proper, and consistent with maintaining tax exempt status under section 501(c)(3).

ARTICLE IV MANNER OF ELECTION

The manner in which directors are elected and appointed is as provided in the Bylaw

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Chris Lane, President
25850 SW 193 Ave
Jazmina Herradora, Vice President
1218 SE 25th Terrace

Homestead, FL 33031 Homestead, FL 33035

Patty Agosto, Treasurer Odeline Derogene, Secretary

30640 SW 188th Ave 845 SW 6th Street Homestead, FL 33030 Homestead, FL 33030

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the Registered Agent is:

Scott Davis 28401 SW 167th Avenue Homestead, FL 33030

<u>ARTICLE VII</u>

INCORPORATOR

The name and Florida street address of the Incorporator is:

Chris Lane 28401 SW 167th Avenue Homestead, FL 33030

ARTICLE VIII

ADDITIONAL PROVISIONS

No part of the net earnings of the corporation shall inure to the benefit of or be distributed to any director, employee or other individual, partnership, estate, trust or corporation having a personal or private interest in the corporation. Compensation for services actually rendered and reimbursement for expenses actually incurred in attending to the affairs of this corporation shall be limited to reasonable amounts. No substantial amount of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation and this corporation shall not intervene in (including the publishing or distributing of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provision of these Articles or of any Bylaws adopted thereunder, this corporation shall not take any action not permitted by the laws which then apply to this corporation.

Upon dissolution of the corporation, its assets shall be disposed of exclusively for the purposes of the corporation or distributed to such organizations organized and operated exclusively for charitable purposes which shall, at the time, qualify as exempt organizations under section 501(c)(3), or shall be distributed to the federal government, or to a state or local government, for a public purpose.

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.

Signature of Registered Agent

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.

Signature of incorporator

COVER LETTER

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

	(PROPOSED CORP	orate name <u>– Must In</u> g	1.0DE SUFFIX
sed is an original a	ind one (1) copy of the ∧rt □ \$ 78.75	ticles of Incorporation and	a check for:

	Name (Printed or typed) 3554 West Orange Country Club Dr. Suite 140		
FROM:			
		Winter Garden, FL 34787	
	City, State & Zip		
	407-614-0103		
	Daytime Telephone number		
	southeast@myrenosi.com E-mail address: (to be used for future annual report notification)		
	E-mail address: (to be used for future annual report notification)		

NOTE: Please provide the original and one copy of the articles.

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