

N 22000002576

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

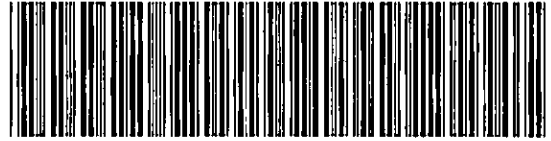
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FBI - PIT

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2022 MAR -4 AM 10:35



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 5, 2021

SYLVIA NYOKA BOONE
2570 PALM BAY RD
PALM BAY, FL 32905

SUBJECT: FRATERNAL ORDER OF EAGLES 4249 AUX
Ref. Number: W21000144586

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

If you have any further questions concerning your document, please call (850) 245-6052.

Karen Lovelace
Regulatory Specialist II
New Filing Section

Letter Number: 321A00027032

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FACILITY

*we forwarded and sent to you
call me*

*if you have questions Rayetta
Patton*

COVER LETTER

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

SUBJECT: Fraternal Order of Eagles 4249 Aux 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: Sylvia Nyoka Boone
Name (Printed or typed)

2570 Palm Bay Road
Address

Palm Bay FL 32905
City, State & Zip

321-724-0162
Daytime Telephone number

Nboone1@CFE.fl.com
E-mail address: (to be used for future annual report notification)

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

2022 MAR -4, PM 3:57
TALLAHASSEE

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

ARTICLE I NAME

The name of the corporation shall be: Fraternal Order of Eagles 4249 Aux INC.

ARTICLE II PRINCIPAL OFFICEPrincipal street address:2570 Palm Bay RoadPalm Bay FL 32909

Mailing address, if different is:

N/A**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Raising money for charity's
Supporting the community

SIN: 91-1799550**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed:Nominations and voting**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Sylvia Nyoka Boone sec.Address: 3210 Fairfax AvenuePalm Bay FL 32909Name and Title: Patty Goodman PresidentAddress: 1125 Genessee Ave. SE.Palm Bay FL 32909Name and Title: Debra Snyder Vice Pres.Address: 1640 Sardinia St. SEPalm Bay FL 32909Name and Title: Brenda Miller Past Pres.Address: 3141 La France Ave SWPalm Bay FL 32908Name and Title: Rayetta Patton AdvisorAddress: 790 Fletcher Rd SEPalm Bay FL 32909

Name and Title:

Address:

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Patty Goodman
 Address: 11255 Genessee Ave SE
Palm Bay FL 32909

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Rayetta Patton
 Address: 790 Fletcher Rd SE
Palm Bay FL 32909

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 FILED

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 days prior or 90 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*

Patty Goodman
 Required Signature of Registered Agent

10/27/21
 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.

Rayetta Patton
 Required Signature of Incorporator

10-27-21
 Date