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(Address)

(City/State/Zip/Phone #)

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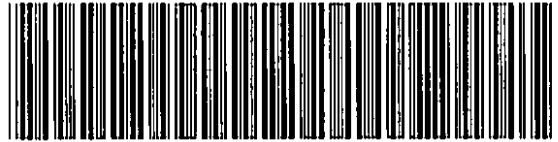
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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T. SCOTT

APR 22 2022



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22 APR - 1 PM 12:43  
A. I. B.

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## COVER LETTER

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

SUBJECT: FL Domestication Filing

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

### FEES:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	<u>\$78.75</u>
Total to domesticate and file	\$128.75

### OPTIONAL:

Certificate of Status	\$ 8.75
-----------------------	---------

Carolyn Moor

Name (printed or typed)

127 W. Fairbanks Ave. #282

Address

Winter Park, FL 32789

City, State & Zip

407.538.1687

Daytime Telephone Number

developmentdirector@modernwidowclub.org

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

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Daytime Telephone Number

developmentdirector@modernwidowclub.o

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

The undersigned, Carolyn Moor, President  
(Name) (Title)  
of Modern Widows Club Inc. a foreign Corporation  
(Corporation Name)

1. The date on which corporation was first formed was 2/17/14, FL

2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Florida

3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Modern Widows Club Inc

4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 617.01201 and 617.0202 with this certificate is Modern Widows Club Inc

5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was NV

6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 617.1803.

I am Carolyn Moor of Modern Widows Club Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 31 day of March, 2022.

  
(Authorized Signature)

<b>Certificate of Domestication</b>	<b>\$50.00</b>
<b>Articles of Incorporation and Certified Copy</b>	<b><u>\$78.75</u></b>
<b>Total to domesticate and file</b>	<b>\$128.75</b>

22 APR - 5 11:12:33

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

**ARTICLE I    NAME**

The name of the corporation shall be:

modern Widows Club Inc

**ARTICLE II    PRINCIPAL OFFICE**

The principal place of business/ mailing address shall be:

Principal Address

Mailing Address

127 W. Fairbanks Ave  
#282

127 W. Fairbanks Ave.  
#282

Winter Park, FL

Winter Park, FL

32789

32789

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized:

Organized exclusively to address, educate,  
coordinate, provide resources and events  
that console, support, mentor and  
advocate for widows in a safe  
environment regardless of race, age,  
religion or circumstance.

22 APR - 6  
FRI 12:10  
A.M.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Directors are appointed and elected by  
existing directors as approved in the  
Bylaws.

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

The name(s) and address(es) and specific title(s):

Title/Name

Title/Name

Pres. Carolyn Moor	Chair/ Susie Ricchetti
127 W. Fairbanks Ave #282	127 W. Fairbanks Ave. #282
Winter Park, FZ 32789	Winter Park, FZ 32789

Title/Name

Title/Name

Treasurer / Pam Kaercher	Secretary / Blake Lasater
127 W. Fairbanks Ave #282	127 W. Fairbanks Ave. #282
Winter Park, FZ 32789	Winter Park, FZ 32789

Title/Name

Title/Name

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Carolyn Moor  
2218 Lakeside Dr.  
Orlando, FL 32803

**ARTICLE VII INCORPORATOR**

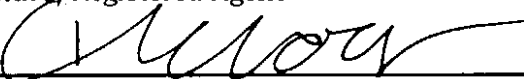
The name and address of the incorporator is:

Carolyn Moor  
2218 Lakeside Dr.  
Orlando, FL 32803

\*\*\*\*\*  
*Having been named as registered agent and 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/Registered Agent

3/31/22  
Date

  
Signature/Incorporator

3/31/22  
Date

N 14 00 0000 1634

Name Release Form for Modern Widows Club, Inc.

As President of Modern Widows Club, Inc, I release the name from P12000096690, a for-profit corporation to be released. Articles of Dissolutin have been filed.

I will no longer use this name, Modern Widows Club, Inc, to be a profit corporation.

Please find my filing request for a **nonprofit corporation** already in your system. My confirmation number is 300256811533. I paid the \$70 fee earlier this week.

If possible, I'd like to proceed with filing for nonprofit as soon as possible since we are finalizing our Form 1023 paperwork next week.

Thank you,  
Carolyn Moor  
Modern Widows Club, Inc  
President

UH  
2/20/14