ROSS MILLER
Secretary of State
204 North Carson Street, Suite 4
Carson City, Nevada 89701-4520
(775) 684 5708
Website: www.nvsos.gov

Nonprofit Articles of Incorporation

(PURSUANT TO NRS CHAPTER 82)

USE BLACK INK ONLY - DO NOT HIGHLIGHT **ABOVE SPACE IS FOR OFFICE USE ONLY**

1. Name of Corporation:

2. Registered Agent for Service of Process: (check only one box)

☐ Commercial Registered Agent: _____ (Name)

☐ Noncommercial Registered Agent (name and address below) ***OR*** ☐ Office or Position with Entity (name and address below)

_____
Name of Noncommercial Registered Agent **OR** Name of Title of Office or Other Position with Entity

_____ (Street Address) _____ (City) Nevada _____ (Zip Code)

_____ (Mailing Address (if different from street address)) _____ (City) Nevada _____ (Zip Code)

3. Names and Addresses of the Board of Directors/Trustees: (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than four directors/trustees)

1) _____ (Name)
_____ (Street Address) _____ (City) _____ (State) _____ (Zip Code)

2) _____ (Name)
_____ (Street Address) _____ (City) _____ (State) _____ (Zip Code)

3) _____ (Name)
_____ (Street Address) _____ (City) _____ (State) _____ (Zip Code)

4) _____ (Name)
_____ (Street Address) _____ (City) _____ (State) _____ (Zip Code)

4. Purpose: (required; continue on additional page if necessary)

The purpose of the corporation shall be:

_____

5. Name, Address and Signature of Incorporator: (attach additional page if more than one incorporator)

_____ (Name) **X** _____ **Incorporator Signature**

_____ (Address) _____ (City) _____ (State) _____ (Zip Code)

6. Certificate of Acceptance of Appointment of Registered Agent:

I hereby accept appointment as Registered Agent for the above named Entity.

X _____ **Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity** _____ Date

This form must be accompanied by appropriate fees.

Reset