	Business ID:
Vermont Secretary of State ARTICLES OF INCORPORATION of a Vermont Nonprofit Corporation	
PLEASE RETURN EVIDENCE OF FILING TO: (Name and Address)	
	Processed by: FOR OFFICE USE ONLY
PLEASE REVIEW SUBMISSION AND FORM INSTRUCTIONS ARTICLE 1. BUSINESS NAME REQUIRED - MUST INCLUDE A CORPORATE IDENTIFIER SUCH A	
PAGE FOR COMPLETE LIST OF OPTIONS	IS CORP, INC, CO, OR LID PLEASE SEE INSTRUCTION
ARTICLE 2. NONPROFIT TYPE a. BENEFIT TYPE: REQUIRED -SELECT ONE (1) OF THE FOLLOWING ☐ This corporation is a PUBLIC benefit corporation as defined by 11B V.S ☐ This corporation is a MUTUAL benefit corporation as defined by 11B V b. MEMBER ORGANIZATION STATUS: REQUIRED - SELECT ONE (1) OF THE FOLLOWING ☐ This corporation IS a member organization. ☐ This corporation IS NOT a member organization.	.S.A. § 17.05.
ARTICLE 3. BUSINESS PURPOSE OPTIONAL – SELECT ONE OF (1) THE FOLLOWING ☐ This a Charitable Organization, Church or Religious Organization, or Priv formed for the purpose of charitable, religious, educational, scientific, literal international amateur sports competition, or preventing cruelty to children activity as defined in sections 501(c)(4) (FOR ACTION ORGANIZATIONS) or 527 (FOR ☐ This is an Action Organization (AS DEFINED BY IRS CODE 501(C)(4)) formed for containing under IRS CODE 501(C)(3) exemption status, except that it MAY participate germane to the organization's programs for the purpose of promoting social ☐ This is a Political Organization (AS DEFINED BY IRS CODE 527) formed for the the selection, nomination, election or appointment of an individual to a feder political organization.	ry, testing for public safety, fostering national or or animals and will not be participating in political R POLITICAL ORGANIZATIONS) of the IRS Code. One or more of the purposes that would otherwise ting in political activity by seeking legislation I welfare. purpose of influencing or attempting to influence
Other: NAICS CODE (PREFERED) OR STATEMENT OF PRIMARY GOODS OR SERVICES TO BE	E PROVIDED UNDER THIS BUSINESS NAME
ARTICLE 4. INITIAL PRINCIPAL OFFICE REQUIRED	
a. Physical Address: NO PO BOX	
City/Town:	

City/Town: ___

State: **VT** ZIP:

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ARTICLE 5. INITIAL REGISTERED AGENT and OFFICE

BELOW) AND THE MAILING POINT OF CONTACT FOR THE S	ECRETARY OF STATE FOR THIS LIMITED	D PARTNERSHI		, ,,, ME	2.7.2.2
Name:					
Mailing Address:					
City/Town:		State:	VT	ZIP:	-
E-Mail Address:			_		
b. Registered Office: REQUIRED - PHYSICAL LOCATION	AT WHICH ANY SERVICE OF PROCESS	S IS TO BE SERV	ED TO	THE REGISTER	ED AGENT (LISTED ABOV
Street Address: NO PO BOX					
City/Town:			VT	ZIP:	-
a. Name:	•				
Address:					
City/Town:					
E-Mail Address:					
b. Name:					
Address:					
City/Town:					
E-Mail Address:					
c. Name:					
Address:					
City/Town:		State:		ZIP:	
E-Mail Address:					
CHECK IF APPLICABLE:					
\square This corporation will have more than three (3) i					
IF SELECTED – MUST ATTACH A COMPLETE LIST <u>WITH</u>		TIAL DIRECTOF	RS		
RTICLE 7. EFFECTIVE DATE OF THESE ARTICLE. MAY BE POST-DATED UP TO 90 DAYS FROM DATE OF RECEI					
RTICLE 8. INCORPORATOR(S) REQUIRED – SELECT					
☐ The directors listed above in Article 7 are a					
\square The incorporator, who is not an initial dire	ctor of this Nonprofit Corpora	tion, is as fo	ollows	:	
Name:					
Address:					
City/Town:		State:		ZIP:	<u>=</u>
E-Mail Address:					
E-Mail Address: ERTIFICATION. REQUIRED-MUST BE SIGNED BY ALL DIRECT We hereby certify, under penalty of law (11B V	TORS AND/OR INCORPORATOR(S) LIS	STED ABOVE IN	I ARTICI	.ES 7 & 9 (111	B V.S.A. § 2.02(C))
listed above), that the above information is acc	**	-			· · · · · · · · · · · · · · · · · · ·
payable to "VT SOS" in the amount of \$125.00.					
Printed Name of Initial Director/Incorporator	Signature				 Date
Printed Name of Initial Director/Incorporator	Signature				Date
Printed Name of Initial Director/Incorporator	Signature				Date
Printed Name of Initial Director/Incorporator	Signature				Date

SUBMISSION INSTRUCTIONS

- a. This form must be filed in duplicate (1 original +1 copy –or-- 2 originals) with a check or money order, payable to "VT SOS," in the amount of \$125.00, and a self-addressed stamped envelope.
- **b.** This form can **ONLY** be accepted by <u>Mail or In-person</u> at:

Vermont Secretary of State Corporations Division 128 State Street Montpelier, VT 05633-1104

c. Please allow 7-10 business days, or more, from the day that *this form* received in our office, for processing and (if approved) for this business appear on the website at www.vtsosonline.com, and for evidence of filing to be returned.

THIS FILING IS NOW AVAILABLE ONLINE

- This form CANNOT be accepted by Phone, Fax, or E-mail; however, this filing is now available online:
 - If you wish to submit this filing electronically, DO NOT fill out this form, please file online at https://www.vtsosonline.com/online/Account?referrer=BF.
- Payment for this form also CANNOT be accepted by <u>creditcard or e-check (ACH)</u>; however, payment by <u>creditcard or e-check (ACH)</u> is available by filing online:
 - If you wish to submit payment by credit card or e-check (ACH), DO NOT fill out this form, please file online at https://www.vtsosonline.com/online/Account?referrer=BF.
 - Online filing normally takes 3-5 business days or less.

FORM INSTRUCTIONS

- Article 1. A corporate name, in accordance with 11B V.S.A. § 4.01:
 - **a.** must contain the word "corporation," "incorporated," "company," or "limited," or the abbreviation "corp.," "inc.," "co.," or "ltd.," or words or abbreviations of like import in another language;
 - **b.** may not contain language stating or implying that the corporation is organized for a purpose other than that permitted by <u>11B V.S.A.</u> § 3.01 of this title and its articles of incorporation;
 - c. will not have the word "cooperative" or any abbreviation thereof as part of its name; and
 - **d.** will not include any word not otherwise authorized by law.
 - **e.** will be, based upon the records of the secretary of state, distinguishable from, and not the same as, deceptively similar to, or likely to be confused with or mistaken for any name granted, registered, or reserved under this chapter, or the name of any other entity, whether domestic or foreign, that is reserved, registered, or granted by or with the secretary of state.
- Article 3. All Nonprofit Corporations are classified as either a public benefit or a mutual benefit corporation as follows (11B VS. § 17.05):
 - **a.** any corporation classified by statute as a public benefit corporation or a mutual benefit corporation is the type of corporation so classified by statute;
 - **b.** any corporation which does not come within subdivision (a) of this section but which is recognized as exempt under section 501(c)(3) of the Internal Revenue Code, or any successor section, is a public benefit corporation;
 - c. any corporation which does not come within subdivision (a) or (b) of this section, but which is organized for a public or charitable purpose and which upon dissolution must distribute its assets to the United States, a state or a person which is recognized as exempt under section 501(c)(3) of the Internal Revenue Code, or any successor section, is a public benefit corporation; and
 - d. any corporation which does not come within subdivision (1), (2) or (3) of this section is a mutual benefit corporation.
- **Article 4.** Must select either <u>IS or IS NOT</u> have members;
- Article 5. Principal Office means the location where the business of the corporation is primarily carried out, or the location where the corporate records are primarily kept.
- Article 6. a. The registered agent must be one (1) of the following (11AVS. § 5.01):
 - (1) An individual who resides in this state (this may include one of the directors or incorporator listed on this form).
 - (2) A domestic corporation or nonprofit domestic corporation.
 - (3) A foreign corporation or nonprofit foreign corporation authorized to transact business in this state.
 - The Registered Office must be identical to the Registered Agent's business address.
- Article 7 a. Must provide the name and residences of the initial directors.
 - **b.** Must attach and provide continuation sheet for more than three (3) initial directors.
- Article 8. The effective date of these articles may be delayed up to op days from date of receipt. If blank or dated prior to date of receipt effective date will be date of receipt.

 $\textbf{Certification.} \ \ \textbf{All directors and/or incorporators named in the articles must sign the articles.} \ \underline{(11B \text{ V.S.A. } \S \text{ 2.02(c)})}$

PLEASE NOTE:

- Information on this application must be current as of the date this registration is filed.
- All required information must be provided. If not, the secretary of state will promptly notify the filer in writing and return this filing to him/her for correction.

For Questions, please contact the Corporations Division at: corps@sec.state.vt.us or at (802) 828-2386