



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
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 Website: www.nvsos.gov

Articles of Incorporation Nonprofit Cooperative Corporation Without Stock

(PURSUANT TO NRS 81.410 - 81.540)

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)	<input type="checkbox"/> Commercial Registered Agent: _____ <small>Name</small>			
	<input type="checkbox"/> Noncommercial Registered Agent OR <input type="checkbox"/> Office or Position with Entity <small>(name and address below) (name and address below)</small>			
	Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity			
	Street Address	City	Nevada _____ <small>Zip Code</small>	
		Nevada _____ <small>Zip Code</small>		
	Mailing Address (if different from street address)	City	Zip Code	
3. Names, Addresses and Number of Board of Directors/Trustees: (must not be less than three members; attach additional page if necessary)	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. Purpose: (required; attach additional page if necessary) <i>The purpose of the corporation shall be:</i>			
	5. Member Property Rights: (see instructions)			
	6. Names, Addresses and Signatures of Incorporators: (must be subscribed by three or more of the original members)	1)	Name	X Incorporator Signature
		Address	City State Zip Code	
2)		Name	X Incorporator Signature	
		Address	City State Zip Code	
3)		Name	X Incorporator Signature	
		Address	City State Zip Code	
7. Certificate of Acceptance of Appointment of Registered Agent:				
<i>I hereby accept appointment as Registered Agent for the above named Entity.</i>				
		X	Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity	Date

This form must be accompanied by appropriate fees.