ARTS-PB-501(c)(3)

Articles of Incorporation of a Nonprofit Public Benefit Corporation

To form a nonprofit public benefit corporation in California, you can fill out this form or prepare your own document, and submit for filing along with:

- A \$30 filing fee.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form or document.

Important! California nonprofit corporations are not automatically exempt from paying California franchise tax or income tax each year. A separate application is required in order to obtain tax exempt status. For more information, go to https://www.ftb.ca.gov/businesses/exempt_organizations or call the California

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Secretary of Stat State of California

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Franchise Tax Board at (916) 845-4171.	1001	
Note: Before submitting this form, you should consult with a pr	rivate attorney for	
advice about your specific business needs.		pace For Office Use Only
For questions about this form, go to	www.sos.ca.gov/business/be/filing	-tips.htm
Corporate Name (List the proposed corporate name. Go to www.sos.ca. and restrictions.)	.gov/business/be/name-availability.htm for ge	neral corporate name requirements
① The name of the corporation is		
Corporate Purpose (Item 2a: Check one or both boxes. Item 2b: The sp purposes, or if you intend to apply for tax-exempt status in California.)	pecific purpose of the corporation must be list	ted if you are organizing for "public"
 a. This corporation is a nonprofit Public Benefit Corpo organized under the Nonprofit Public Benefit Corpora 	ition Law for: public purposes.	. charitable purposes.
b. The specific purpose of this corporation is to SUPPO	ort the local visual, performin	g, and culinary arts.
Service of Process (List a California resident or an active 1505 corporat in case your corporation is sued. You may list any adult who lives in California the agent is a 1505 corporation as the address for service of process is already	YOU may not list your own corneration as t	agent to accept service of process he agent. Do not list an address if
③ a. Susana Peredo Swap	•	
Agent's Name		
b. 703 Tarento Drive	San Diego	CA 92106
Agent's Street Address (if agent is not a corporation) - Do not list a	P.O. Box City (no abbreviations)	State Zip
Corporate Addresses		
④ a. 703 Tarento Drive	San Diego CA 9210)6
Initial Street Address of Corporation- Do not list a P.O. Box	City (no abbreviations)	State Zip
b		·
Initial Mailing Address of Corporation, if different from 4a	City (no abbreviations)	State Zip
Additional Statements (The following statements are required to obtain Tax Board under Internal Revenue Code section 501(c)(3). Note: Corporations	n tax exemption from the Internal Revenue s seeking other types of tax exemptions shoul	Service or the California Franchise d not use this form.)
 a. This corporation is organized and operated exclusi meaning of Internal Revenue Code section 501(c)(3). 		
 No substantial part of the activities of this corporation to influence legislation, and this corporation shall no publishing or distribution of statements) on behalf of a 	t participate or intervene in any polit ny candidate for public office	ical campaign (including the
 The property of this corporation is irrevocably dedication. income or assets of this corporation shall ever inure benefit of any private person. 	ated to the purposes in Article 2a h to the benefit of any director, officer	or member thereof or to the
d. Upon the dissolution or winding up of this corporation all debts and liabilities of this corporation shall be di organized and operated exclusively for charitable, ed its tax-exempt status under Internal Revenue Code se	istributed to a nonprofit fund, founda lucational and/or religious purpose	tion or corneration
This form must be signed by each incorporator. If you need modelter-sized paper of 1/2" x 11"). All attachments are made part of thes	ore space, attach extra pages that a e articles of incorporation.	are 1-sided and on standard
() () () () () () () () () ()	2 2 -	•
	Susana Peredo Swap	
Incorporator—Sign here	Print your name here	
Make check/money order payable to: Secretary of State Upon filing, we will return one (1) uncertified copy of your	By Mail Secretary of State	Drop-Off Secretary of State

Business Entities, P.O. Box 944260

Sacramento, CA 94244-2600

filed document for free, and will certify the copy upon

request and payment of a \$5 certification fee.

Secretary of State

1500 11th Street, 3rd Floor

Sacramento, CA 95814



Date:_

I hereby certify that the foregoing transcript of ______ page(s) is a full, true and correct copy of the original record in the custody of the California Secretary of State's office.

JUN 0 1 2016 OP



ALEX PADILLA, Secretary of State