

15-660



STATE OF MINNESOTA  
SECRETARY OF STATE  
ARTICLES OF INCORPORATION  
Business and Nonprofit Corporations

3 / 22

0497

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK.  
Please read the directions on the reverse side before completing this form. All information on this form is public information.

TO EXPEDITE THE RETURN OF YOUR DOCUMENTS, PLEASE SUBMIT A STAMPED, SELF-ADDRESSED ENVELOPE.

The undersigned incorporator(s) is an (are) individual(s) 18 years of age or older and adopt the following articles of incorporation to form a (mark ONLY one):

FOR-PROFIT BUSINESS CORPORATION (Chapter 302A)  NONPROFIT CORPORATION (Chapter 317A)  
ARTICLE I NAME

The name of the corporation is:

KENNEDY PARENT-TEACHERS ORGANIZATION

(Business Corporation names must include a corporate designation such as Incorporated, Corporation, Company, Limited or an abbreviation of one of these words.)

ARTICLE II REGISTERED OFFICE ADDRESS AND AGENT

The registered office address of the corporation is:

2600 E MAIN ST MANKATO MN 56001-3559

(A complete street address or rural route and rural route box number is required; the address cannot be a P.O. Box) City State Zip

The registered agent at the above address is:

(Note: You are not required to have a registered agent.) Name

ARTICLE III SHARES

The corporation is authorized to issue a total of \_\_\_\_\_ shares.  
(If you are a business corporation you must authorize at least one share. Nonprofit corporations are not required to have shares.)

ARTICLE IV INCORPORATORS

I (We), the undersigned incorporator(s) certify that I (we) are authorized to execute these articles and that the information in these articles is true and correct. I (We) also understand that if any of this information is intentionally or knowingly misstated that criminal penalties will apply as if I had signed these articles under oath. (Provide the name and address of each incorporator. Each incorporator must sign below. List the incorporators on an additional sheet if you have more than two incorporators.)

x Deborah Sundblad	201 Cameo Lane	Mankato	Mn	56001	Deborah Sundblad
Name	Street	City	State	Zip	Signature
x Yvonne Karsten	323 Fair Ave	Mankato	MN	56001	Yvonne Karsten
Name	Street	City	State	Zip	Signature

List the Standard Industrial Classification Code (SIC) that most accurately describes the nature of the business of this corporation. Select one of the 2-digit SIC Codes listed on the backside of this form. 99

Print name and phone number of person to be contacted if there is a question about the filing of these articles.

JILL GATES  
Name

STATE OF MINNESOTA  
DEPARTMENT OF STATE  
607) 625-2326  
Phone Number

00930254 Rev. 08/93

913858

FILED  
SEP 30 1993

Jan Anderson  
Secretary of State

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SEP 30 1993

STATE OF MINNESOTA

DEPARTMENT OF STATE

607) 625-2326

Phone Number

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SEP 30 1993

Jan Anderson  
Secretary of State

DATE