

# State of Tennessee



**Department of State**  
Corporate Filings  
312 Rosa L. Parks Avenue  
6<sup>th</sup> Floor, William R. Snodgrass Tower  
Nashville, TN 37243

## CHARTER (Nonprofit Corporation)

For Office Use Only

The undersigned acting as incorporator(s) of a nonprofit corporation under the *Tennessee Nonprofit Corporation Act* adopts the following Articles of Incorporation.

1. The name of the corporation is: \_\_\_\_\_

2. Please complete all of the following sentences by checking one of the two boxes in each sentence:

This corporation is a  public benefit corporation /  mutual benefit corporation.

This corporation is a  religious corporation /  not a religious corporation.

This corporation will  have members /  not have members.

3. The name and complete address of the corporation's initial registered agent and office in Tennessee is:

|             |                       |             |              |                 |               |
|-------------|-----------------------|-------------|--------------|-----------------|---------------|
| _____       | _____                 | _____       | _____        | _____           | _____         |
| <i>Name</i> | <i>Street Address</i> | <i>City</i> | <i>State</i> | <i>Zip Code</i> | <i>County</i> |

4. List the name and complete address of each incorporator:

|             |                       |             |              |                 |
|-------------|-----------------------|-------------|--------------|-----------------|
| _____       | _____                 | _____       | _____        | _____           |
| <i>Name</i> | <i>Street Address</i> | <i>City</i> | <i>State</i> | <i>Zip Code</i> |

|             |                       |             |              |                 |
|-------------|-----------------------|-------------|--------------|-----------------|
| _____       | _____                 | _____       | _____        | _____           |
| <i>Name</i> | <i>Street Address</i> | <i>City</i> | <i>State</i> | <i>Zip Code</i> |

|             |                       |             |              |                 |
|-------------|-----------------------|-------------|--------------|-----------------|
| _____       | _____                 | _____       | _____        | _____           |
| <i>Name</i> | <i>Street Address</i> | <i>City</i> | <i>State</i> | <i>Zip Code</i> |

5. The complete address of the corporation's principal office is:

|                       |             |                      |                 |
|-----------------------|-------------|----------------------|-----------------|
| _____                 | _____       | _____                | _____           |
| <i>Street Address</i> | <i>City</i> | <i>State/Country</i> | <i>Zip Code</i> |

6. The corporation is not for profit.

7. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date and time are:

Date \_\_\_\_\_, \_\_\_\_\_ Time \_\_\_\_\_ (Not to exceed 90 days.)

8. Insert here the provisions regarding the distribution of assets upon dissolution: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Other provisions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Incorporator's Signature

\_\_\_\_\_  
Incorporator's Name (typed or printed)



**Department of State**  
 Corporate Filings  
 312 Rosa L. Parks Avenue  
 6<sup>th</sup> Floor, William R. Snodgrass Tower  
 Nashville, TN 37243

**CHARTER**  
 (Nonprofit Corporation)

For Office Use Only

The undersigned acting as incorporator(s) of a nonprofit corporation under the *Tennessee Nonprofit Corporation Act* adopts the following Articles of Incorporation.

1. The name of the corporation is: World Wide MC/SC

2. Please complete all of the following sentences by checking one of the two boxes in each sentence:

This corporation is a  public benefit corporation /  mutual benefit corporation.

This corporation is a  religious corporation /  not a religious corporation.

This corporation will  have members /  not have members.

3. The name and complete address of the corporation's initial registered agent and office in Tennessee is:

|                     |                               |                     |                      |                         |                       |
|---------------------|-------------------------------|---------------------|----------------------|-------------------------|-----------------------|
| <u>John Doe</u>     | <u>1234 My Street</u>         | <u>Nashville</u>    | <u>TN</u>            | <u>37211</u>            | <u>Davidson</u>       |
| <small>Name</small> | <small>Street Address</small> | <small>City</small> | <small>State</small> | <small>Zip Code</small> | <small>County</small> |

4. List the name and complete address of each incorporator:

|                     |                               |                     |                      |                         |
|---------------------|-------------------------------|---------------------|----------------------|-------------------------|
| <u>Joe Doe</u>      | <u>1234 My Street</u>         | <u>Nashville</u>    | <u>TN</u>            | <u>37211</u>            |
| <small>Name</small> | <small>Street Address</small> | <small>City</small> | <small>State</small> | <small>Zip Code</small> |
| <u>Millie Doe</u>   | <u>1234 My Street</u>         | <u>Nashville</u>    | <u>TN</u>            | <u>37211</u>            |
| <small>Name</small> | <small>Street Address</small> | <small>City</small> | <small>State</small> | <small>Zip Code</small> |
| <u>Harry Smlie</u>  | <u>707 Lost Blvd.</u>         | <u>Nashville</u>    | <u>TN</u>            | <u>37212</u>            |
| <small>Name</small> | <small>Street Address</small> | <small>City</small> | <small>State</small> | <small>Zip Code</small> |

5. The complete address of the corporation's principal office is:

|                               |                     |                              |                         |
|-------------------------------|---------------------|------------------------------|-------------------------|
| <u>1234 My Street</u>         | <u>Nashville</u>    | <u>TN</u>                    | <u>37211</u>            |
| <small>Street Address</small> | <small>City</small> | <small>State/Country</small> | <small>Zip Code</small> |

6. The corporation is not for profit.

7. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date and time are:  
 Date \_\_\_\_\_, \_\_\_\_\_ Time \_\_\_\_\_ (Not to exceed 90 days.)

8. Insert here the provisions regarding the distribution of assets upon dissolution: The assets will be given to a like non profit

9. Other provisions: None

\_\_\_\_\_  
 Signature Date

\_\_\_\_\_  
 Incorporator's Signature

Joe Doe  
 Incorporator's Name (typed or printed)