



State of Utah  
 Department of Commerce  
 Division of Corporations & Commercial Code  
 Articles of Incorporation (Nonprofit)

Important: Read instructions before completing form

**Non-Refundable Processing Fee: \$30.00**

<b>1. Name of Corporation:</b>			
<b>2. Purpose:</b>			
<b>3. Who/What is the name of the Registered Agent (Individual or Business Entity or Commercial Registered Agent)?:</b>			
The address must be listed if you have a non-commercial registered agent. See instructions for further details.			
Address of the Registered Agent: _____			
<b>Utah Street Address Required, PO Boxes can be listed after the Street Address</b>			
City: _____		State <b>UT</b>	Zip: _____
<b>4. Name, Signature and Address of Incorporator</b>  <small>(attach additional page if there is more than 1 incorporator)</small>	Name _____		
	Address _____	City _____	State _____ Zip _____
	Signature: _____		Date: _____
<b>5. Voting Members:</b>	The nonprofit corporation <b>will</b> <b>will not</b> have voting members.		
<b>6. Shares:</b>	The nonprofit corporation <b>will</b> <b>will not</b> issue shares evidencing membership or interests in water or other property rights.		
	The aggregate number of shares that the nonprofit corporation has authority to issue shall be _____		
	The shares <b>will</b> <b>will not</b> be divided up in to classes.		
	Type 1: _____	Number of Shares: _____	
	Statement: _____		
Type 2: _____	Number of Shares: _____		
Statement: _____			
<b>7. Assets: Upon dissolution assets of the corporation will be distributed in a manner consistent with law.</b>			
<b>8. Principal Address:</b>	Address _____ City _____ State _____ Zip _____		
<b>9. Name and Address of Directors:</b>  <small>(attach an additional page if there are more than 3 directors)</small>	<b>1.</b> _____		
	<b>Name</b> _____	<b>Position</b> _____	
	Address _____	City _____	State _____ Zip _____
	<b>2.</b> _____		
	<b>Name</b> _____	<b>Position</b> _____	
	Address _____	City _____	State _____ Zip _____
	<b>3.</b> _____		
	<b>Name</b> _____	<b>Position</b> _____	
	Address _____	City _____	State _____ Zip _____
<b>Under GRAMA {63G-2-201}, all registration information maintained by the Division is classified as public record.</b>			
<b>Optional Inclusion of Ownership Information: This information is not required.</b>			
Is this a female owned business?	Yes	No	
Is this a minority owned business?	Yes	No	If yes, please specify: _____