040604

BARBARA K. CEGAVSKE
Secretary of State
202 North Carson Street
Carson City, Nevada 89701-4201
(775) 684-5708
Website: www.nvsos.gov

Nonprofit Articles of Incorporation

(PURSUANT TO NRS CHAPTER 82)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Corporation:

Alliance Francaise Reno

2. Registered Agent for Service of Process: (check only one box)

☐ Commercial Registered Agent: _____ (Name)

☒ Noncommercial Registered Agent (name and address below) **OR** ☐ Office or Position with Entity (name and address below)

M Josette Marsh

Name of Noncommercial Registered Agent **OR** Name of Title of Office or Other Position with Entity

2375 Cartwright Road	VC Highlands	Nevada	89521
Street Address	City		Zip Code
		Nevada	
Mailing Address (if different from street address)	City		Zip Code

3. Names and Addresses of the Board of Directors/Trustees: (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than four directors/trustees)

1) M Josette Marsh (Name)

2375 Cartwright Road	VC Highlands	NV	89521
Street Address	City	State	Zip Code

2) Walter Frankmoelle (Name)

1851 Steamboat Pkwy Unit 12233	Reno	NV	89521
Street Address	City	State	Zip Code

3) Linda Miller (Name)

3840 Boulder Patch	Reno	NV	89511
Street Address	City	State	Zip Code

4) Isabelle Favre (Name)

3345 GROOM WAY	SPARKS	NV	89434
Street Address	City	State	Zip Code

4. Purpose: (required; continue on additional page if necessary)

The purpose of the corporation shall be:

To contribute to the cultural diversity in the greater Reno area by teaching the French language and promoting francophone culture

5. Name, Address and Signature of Incorporator: (attach additional page if more than one incorporator)

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

M Josette Marsh (Name) — X _____ (Incorporator Signature)

2375 Cartwright Road	VC Highlands	NV	89521
Address	City	State	Zip Code

6. Certificate of Acceptance of Appointment of Registered Agent:

I hereby accept appointment as Registered Agent for the above named Entity. If the registered agent is unable to sign the Articles of Incorporation, submit a separate signed Registered Agent Acceptance form.

X _____ (Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity) Date

This form must be accompanied by appropriate fees.

Reset

(NONPROFIT) INITIAL/ANNUAL LIST OF OFFICERS AND DIRECTORS OF:

ENTITY NUMBER

Alliance Francaise Reno

NAME OF CORPORATION

FOR THE FILING PERIOD OF October 27, 2022 TO December 31, 2023

100206

USE BLACK INK ONLY - DO NOT HIGHLIGHT

** YOU MAY NOW FILE THIS LIST ONLINE AT www.nvsilverflume.gov **

☒ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. If there are additional officers, attach a list of them to this form. An **Officer or other authorized signer** must sign the form. *FORM WILL BE RETURNED IF UNSIGNED.*
2. Return the completed form with the $50.00 filing fee, if no capitalization. A $50.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
3. Make your check payable to the Secretary of State. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

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4. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.
5. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional $30.00 per certification. A copy fee of $2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

FILING FEE: $50.00 (IF NO CAPITALIZATION) LATE PENALTY: $50.00 (if filing late)

Charitable Solicitation Information - check applicable box

Does Organization intend to solicit charitable/tax deductible contributions? ☐ No - no additional form required ☒ Yes - "Charitable Solicitation Registration Statement" required

Organization claims exemption pursuant to (2015) AB50 15(1) or is recognized as a church under Internal Revenue Code 501(c)(3). ☐ Exempt from filing - "Exemption From Charitable Solicitation Registration Statement" required

** Failure to include the required statement form will result in rejection of the filing and could result in late fees.**

For nonprofit entities formed under NRS Chapter 80: entities without 501(c) nonprofit designation are required to maintain a state business license, the fee is $200.00. Those claiming an exemption under 501(c) designation must indicate by checking box below and submit Declaration of Eligibility form. **Failure to attach the required notarized Declaration of Eligibility will result in a rejection, which could result in late fees.**

☐ Pursuant to NRS Chapter 76, this entity is a 501(c) nonprofit entity and is exempt from the business license fee. Exemption code 002

NRS Chapter 81 - Nonprofit: entities which are Unit-owners' association or Religious, charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C. § 501(c) are excluded from the requirement to obtain a state business license. Please indicate below if this entity falls into one of these categories by marking the appropriate box. If the entity does not meet either of these categories please submit $200.00 for the state business license.

☐ Unit-owners' Association ☒ Religious, charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C. § 501(c)

NAME	TITLE(S)		
M Josette Marsh	PRESIDENT (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
2375 Cartwright Road	VC Highlands	NV	89521
NAME	TITLE(S)		
Walter Frankmoelle	SECRETARY (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
1851 Steamboat Pkwy Unit 12233	Reno	NV	89521
NAME	TITLE(S)		
Linda Miller	TREASURER (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
3840 Boulder Patch	Reno	NV	89511
NAME	TITLE(S)		
Isabelle Favre	DIRECTOR		
ADDRESS	CITY	STATE	ZIP CODE
3345 GROOM WAY	SPARKS	NV	89434

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X _____

Signature of Officer or Other Authorized Signature

Title: President

Date: 10/27/22

Reset

Nevada Secretary of State List Nonprofit
Revised: 10-1-15