

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
BUSINESS AND PROFESSIONAL LICENSING ADMINISTRATION
CORPORATIONS DIVISION

Government
Of the
District of Columbia
941 NORTH CAPITOL STREET, N.E.
WASHINGTON, D.C. 20002

**COOPERATIVE ASSOCIATION GUIDELINES
FORMAT AND STATUTORY CONTENTS
FOR PROFIT AND NON-PROFIT ASSOCIATIONS**

NOTE: THIS IS A SPECIMEN FORMAT FOR ARTICLES OF INCORPORATION.
YOU MUST DRAFT YOUR OWN ARTICLES ON PLAIN BOND PAPER TO BE
SUBMITTED IN **DUPLICATE ORIGINAL**. (TWO MANUALLY SIGNED SETS)

**ARTICLES OF INCORPORATION
OF
(NAME OF COOPERATIVE ASSOCIATION)**

TO:

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
BUSINESS AND PROFESSIONAL LICENSING ADMINISTRATION
CORPORATIONS DIVISION
941 NORTH CAPITOL STREET, N.E.
WASHINGTON, D.C. 20002

I/We, the undersigned natural person(s) of the age of eighteen years or more acting as incorporator(s) of a corporation under the COOPERATIVE ASSOCIATION ACT (D.C. Code, 2001 edition, Title 29, Chapter 9, as amended), adopt the following Articles of Incorporation:

FIRST: The name of the association which must include the word “cooperative”;
(STATE NAME OF ASSOCIATION).

SECOND: The term of existence of the association is (STATE EITHER PERPETUAL
OR A SPECIFIED PERIOD).

THIRD: The purpose(s) for which the association is organized is/are: (STATE
SPECIFIC PURPOSES OF ASSOCIATION: GENERAL PURPOSES ARE NOT
ACCEPTABLE).

FOURTH: State whether the association is organized with or without shares and the
number of shares or membership subscribed for;

FIFTH: If organized with shares, a statement of the amount of authorized capital, the
number and types of shares and the par value thereof).

SIXTH: State the minimum number of value of shares which must be owned to qualify for membership;

SEVENTH: State the maximum amount or percentage of capital which may be owned or controlled by any member.

EIGHTH: State the method by which any surplus, upon dissolution of the association, shall be distributed

NINTH: The address, including street and number of the principal office of the association is (LIST STREET ADDRESS OF AGENT IN THE DISTRICT - POST OFFICE BOXES ARE NOT ACCEPTABLE)

TENTH: The name(s) and address (es), including street and number if any, of the incorporator(s) (MINIMUM OF 5 INCORPORATOR REQUIRED IF NATURAL PERSON OR THE PRESIDENTS AND SECRETARIES, IF ASSOCIATIONS.

ELEVENTH: Application must be signed by Incorporators and Acknowledge by at least 5 if natural persons, or by the Presidents and secretaries, if an Associations. Also, if an Associations, before an Officer authorized to take acknowledgement (must be notarized).

DATE _____

Submit two originally signed sets of articles to the Department of Consumer and Regulatory Affairs

