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(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
,				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to Filing Officer.				
GAVE				
AUTHORIZATION BY PHONE TO				
CORRECT				
DATE				
DOC. EXAM				

Office Use Only



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TALLAHASSEE FLORING

MRD /////

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Fort N	Myers City Employ	yees Union, Ind	C
	(PROPOSED CORPORAT	E NAME – <u>MUST INCL</u> I	JDE SUFFIX)
Enclosed is an original a \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate OPY REQUIRED
FROM:	Shelley Mason	inted or typed)	_
	2147 Flora Ave	ddress	_
	Fort Myers, FL 3	33907 State & Zip	
	239-218-1597		

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

412 Desorratione Telephone number

seashellfl@hotmail.com

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

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•	eqrporation shall be:		
RTICLE II	PRINCIPAL OFFICE Principal street address		Mailing address, if different is:
412 Desoto Ave			P.O. Box 2818
	Fort Myers, FL 33972		Fort Myers, FL 33902
RTICLE III	PURPOSE		
ne purpose for	which the corporation is organized is:		
ngage in colle ours and wor	s City Employees Union, Inc. shall promote ective bargaining with the City of Fort Myer king conditions. To engage in grevance probers and the City of Fort Myers, FL.	s, Florida for the	purpose of establishing contractual wages,
RTICLE IV	MANNER OF ELECTION The manner in	in which the director	s are elected and appointed:
oting members us ARTICLE V	ing a ballot box. Officers will serve a 3 year term beginni INITIAL OFFICERS AND/OR DIRECT Title: Thomas O'Malley, President 412 Desoto Ave	ng of the fiscal year of 6 'ORS	nd elections will take place before the end of the month by October 1st. Directors will be vot upon :: Tatum Walker, Secretary 4351 States Cir
	Lehigh Acres, FL 33972		Fort Myers, FL 33905
Name and ' Address:	Title: Allen Shaffer, Vice President 7525 San Carlos Blvd. Fort Myers, FL 33967		
Name and	Title: Shelley Mason, Treasurer	Mome and Title	
Address:	2147 Flora Ave		>0 -
11001000	Fort Myers, FL 33907	7 1001055.	-8 Z 11
			3 70-
RTICLE VI	REGISTERED AGENT		The second of th
	lorida street address (P.O. Box NOT acceptable)	of the registered and	
Name:	Thomas O'Malley		- 11, <u>- 2</u> om
Address:	412 Desoto Ave		ri .ve.com
	Lehigh Acres, FL 33972		TORID TORID
	<u> </u>		4: 42 ORIDA
RTICLE VII	INCORPORATOR		₩
	Idress of the Incorporator is:		
Name:	Shelley Mason		
Address:	2147 Flora Ave		
	Fort Myers, FL 33907		
aving been na	med as registered agent to accept service of pro	cess for the above	stated corporation at the place designated in this
ertificate, I am f	familiar with and accept the appointment as regist	tered agent and agre	ee to act in this capacity
J.	Required Signature of Registered Agent		1/5/11
	Required Signature of Registered Agent		Date
submit this doc		true. I am aware th	hat any false information submitted in a document
1/	elly Madow— Required Signature of Incorporato	·ньси јог иг 5:01 /.13.	
V/h	elly Mason		1)5//1 Date
70.0	Required Signature of Incorporate	or	Date