

N11000007470

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Joseph Burley **NAME**

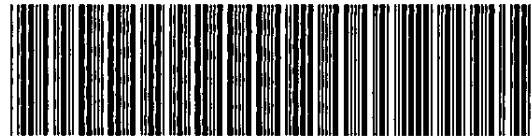
AUTHORIZATION BY PHONE TO

CORRECT Article V

DATE 8/8/11

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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8/8

COVER LETTER

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

SUBJECT: Disabled Veterans Hot Rod Club, Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee &
Certificate of
Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Joseph Burley
Name (Printed or typed)

1001 Starkey Road, Suite 797
Address

Largo, FL 33771
City, State & Zip

(727) 585-5332
1001 Starkey Road, Suite 797 number

BurleyJCB@Hotmail.com
E-mail address: (to be used for future annual report notification)

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

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Mailing address, if different is:

ARTICLE I NAME

Disabled Veterans Hot Rod Club, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

1001 Starkey Road, Suite 797

Largo, FL 33771

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Create an environment whereby disabled veterans can build vintage automobiles.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

Non-Paid volunteers appointed by the Incorporator.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William N. Stephenson, Executive Director

Address: 2444 Summerlin Drive

Clearwater, FL 33764

Name and Title: _____

Address: _____

Name and Title: Joseph Burley, Secretary/Treasurer

Address: 1001 Starkey Road, Suite 797

Largo, FL 33771

Name and Title: _____

Address: _____

Name and Title: Bernal Hubbard, Director of Administration

Address: 2127 Shelburne Court

Westley Chapel, FL 33543

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Joseph Burley

Address: 1001 Starkey Road, Suite 797

Largo, FL 33771

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William N. Stephenson

Address: 2444 Summerlin Drive

Clearwater, FL 33764

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Joseph Burley

Required Signature of Registered Agent

8-1-2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

William N. Stephenson

Required Signature of Incorporator

8-1-2011

Date