

NK4000009701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

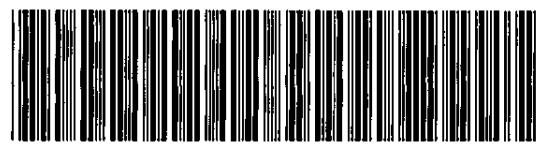
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/19/14--01019--009 **87.50

FILED
14 OCT 20 AM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1114-57949

MD 10/21

COVER LETTER

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

SUBJECT: Martin County High School Drama Boosters, 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: Glenn J Webber
Name (Printed or typed)

101 East Ocean Blvd #203
Address

Stuart, FL 34994
City, State & Zip

772 287 5600
Daytime Telephone number

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 22, 2014

GLENN J. WEBBER
101 EAST OCEAN BLVD., #203
STUART, FL 34994

SUBJECT: MARTIN COUNTY HIGH SCHOOL DRAMA BOOSTERS INC
Ref. Number: W14000057949

We have received your document for MARTIN COUNTY HIGH SCHOOL DRAMA BOOSTERS INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 814A00020283

Glenn J. Webber, P.A.

101 SE Ocean Blvd., Suite 203, Stuart, FL 34994
Tel 772-287-5600 Fax 772-781-7561
www.webberlawfirm.com

October 14, 2014

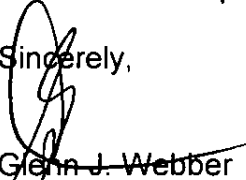
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
Attn: Regulatory Specialist

Re: Articles of Incorporation

Dear Ms. Dickey:

As per your request, enclosed you will find the corrected original Articles of Incorporation, along with a copy and your letter dated September 22, 2014.

Sincerely,


Glenn J. Webber
For the Firm

GJW/sja

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

ARTICLE I NAME

The name of the corporation shall be: Marta County High School Drama Boasters, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2801 South Kanner Highway
Stuart, FL 34994

Mailing address, if different _____

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CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of the corporation is
exclusively for charitable/educational purposes, making of distributions
to exempt organization under IRC 501(c)(3), No profit of
the corporation shall inure to the benefit of, or be distributable to
its members, officers or other private persons, except for reasonable
remuneration of services rendered. Upon dissolution, after payment
of local liabilities, the assets shall be distributed per 501(c)(3)

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: _____

By Board Vote

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

P Name and Title: Arthur Thomas (Pres) Name and Title: Shannon Magill (VP) ✓
Address: 1952 SW Windcrown Rd Address: 5704 SW Longspur Lane
Palm City, FL 34990 Palm City, FL 34990

S Name and Title: Steve Grou (Secy) Name and Title: Trish Miller (Treas) T
Address: 1408 SW Seehawk Way Address: 3142 SW Solitaire Palm Dr
Palm City, FL 34990 Palm City FL

G Name and Title: Glenn Webster (At Large) Name and Title: _____
Address: 101 East Ocean Blvd Address: _____
203
Stuart, FL 34994

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Glenn J Webb

Address: 101 East Ocean Blvd #203
Street, FL 34994

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

FILED

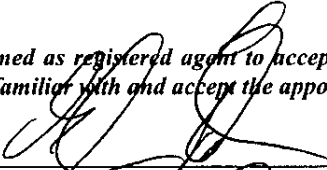
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Glenn J Webb

Address: 101 East Ocean Blvd #203
Street, FL 34994

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

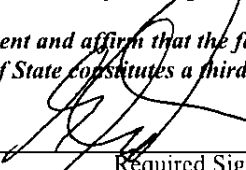


Required Signature of Registered Agent

10/14/14

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.



Required Signature of Incorporator

10/14/14

Date