

# N16000000576

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
 Fax Number : (850) 617-6381

From: *Andrew Dunstan*  
 Account Name : FOLEY & LARDNER OF TAMPA  
 Account Number : 071344001620  
 Phone : (813) 229-2300  
 Fax Number : (813) 221-4210

2016 JAN 21 AM 11:24  
 SECRETARY OF STATE  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**Barbecue Cookoff for Charity, INC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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

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**ARTICLE I NAME**  
The name of the corporation shall be: Barbecue Cookoff for Charity, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address:  
820 S 78th St.

Building B

Tampa, FL 33619

Mailing address, if different is:

P.O. Box 3013

Brandon, FL 33509

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**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The corporation is organized exclusively in order to engage in any lawful

purpose as a not-for-profit corporation under Section 501(c)(3) of the Internal Revenue Code including the following purpose:

to raise money for local charities through BBQ competitions; however, the corporation shall not carry on any activity not permitted

to be carried on by a corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. The

Corporation shall not engage in any activity ordinarily carried on for profit.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: Directors are  
appointed by the Chairman and approved by a majority vote of the current officers.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Michelle Bartley - Chairman Name and Title: \_\_\_\_\_

Address: P.O. Box 3013 Address: \_\_\_\_\_

Brandon, FL 33509 \_\_\_\_\_

Name and Title: Duranta (Dee) Smith - Treasurer Name and Title: \_\_\_\_\_

Address: P.O. Box 3013 Address: \_\_\_\_\_

Brandon, FL 33509 \_\_\_\_\_

Name and Title: Scarlett Smith - Secretary Name and Title: \_\_\_\_\_

Address: P.O. Box 3013 Address: \_\_\_\_\_

Brandon, FL 33509 \_\_\_\_\_

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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: Michelle Eastley

Address: 820 S. 78th St. Building B  
Tampa, FL 33619

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Scarlett Smith

Address: 820 S. 78th St. Building B  
Tampa, FL 33619

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Michelle Eastley  
 Required Signature of Registered Agent

1/20/16  
 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.

Scarlett Smith  
 Required Signature of Incorporator

1/21/16  
 Date

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