

N1802205713

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

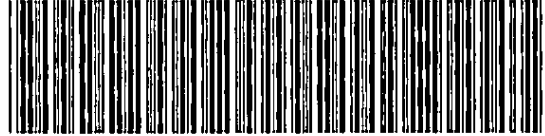
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

MAY 22 2018

SCOTT



200312388092

05/11/18--01016--016 **105.00

FILED
2018 MAY 21 PM 4:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Camp Live Oak, Inc., A Non Profit Corporation

(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: David L'Amie, President - Camp Live Oak, Inc.

Name (Printed or typed)

2300 E. Oakland Park Boulevard, Suite 207

Address

Fort Lauderdale, FL 33306-1150

City, State & Zip

954-563-4880

Daytime Telephone number

info@campliveoakfl.com

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

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



May 18, 2018

To Whom It May Concern:

I am the owner of Camp Live Oak, Inc., a Florida For Profit Corporation and I have no intention of revoking the dissolution of that corporation because I want to set up a Florida Non-Profit Corporation with the exact same name of Camp Live Oak, Inc. The directors and officers of the for-profit corporation are the same for the non-profit corporation, with the addition of an appointed board per non-profit corporation organization.

Sincerely yours,

David L'Amie, Director

Kenneth N. Evans, Trustee

Bring Out the Green in Your Child

EXECUTIVE OFFICES: 2300 East Oakland Park Blvd. Suite 207, Fort Lauderdale, Florida 33308

FORT LAUDERDALE - DANIA BEACH

PHONE: 954.563.4880 • FAX: 954.563.4885

www.CampLiveOakFL.com

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Camp Live Oak, Inc.,

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2300 E. Oakland Park Boulevard, Suite 207
Fort Lauderdale, FL 33306-1150

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Camp Live Oak is an environmental day camp working in a
cooperative effort with Florida's State Park System to provide a quality environmental experience for children and is organized
exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to
organizations that qualify as exempt organizations described under Section 501 9c) (3) of the Internal Revenue Code, or
corresponding section of any future federal tax code.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Appointed

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>David L'Amie, Chairman</u>	Name and Title:	<u>Ms. Tracy Roleff, Board Trustee</u>
Address	<u>4624 Sea Grape Drive</u> <u>Lauderdale By The Sea, FL 33308</u>	Address:	<u>115 NE 6th Street, #2115</u> <u>Fort Lauderdale, FL 33304</u>
Name and Title:	<u>Ms. Mary White, Board Trustee</u>	Name and Title:	<u>Ms. Debbie Lipscomb, Board Trustee</u>
Address	<u>12060 NW 33rd Street</u> <u>Coral Spring, FL 33065</u>	Address:	<u>1321 NE 25th Avenue</u> <u>Pompano Beach, FL 33062</u>
Name and Title:	<u>Mr. Kenneth N. Evans, Board Trustee</u>	Name and Title:	<u>Mr. Scott Lipscomb, Board Trustee</u>
Address	<u>4624 Sea Grape Drive</u> <u>Lauderdale By The Sea, FL 33308</u>	Address:	<u>1321 NE 25th Avenue,</u> <u>Pompano Beach, FL 33062</u>

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 MAY 21 PM 4:25

FILED

Name and Title: Dr. Hanora E. O'Connell, Trustee Name and Title: _____
Address: 5290 NE Seventeenth Avenue Address: _____
Fort Lauderdale, FL 33334 _____

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: David L'Amie, Chairman
Address: 2300 E. Oakland Park Boulevard, Suite 207
Fort Lauderdale, FL 33306-1150

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: David L'Amie, Chairman
Address: 2300 E. Oakland Park Boulevard, Suite 207
Fort Lauderdale, FL 33306-1150

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 5/18/2018 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

David L'Amie

Required Signature of Registered Agent

5/17/2018

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 §817.155, F.S.

David L'Amie

Required Signature of Incorporator

5/17/2018

Date