

N000000005926  
TRANSMITTAL LETTER

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

900003381519--3  
-09/05/00--01072--010  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: The Friends of the San Marco Library, 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

\$35.00  
non-profit

☐ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Soren Brockdorf  
Name (Printed or typed)

4362 Kelney Dr.  
Address

Jacksonville FL 32207  
City, State & Zip

1-904-448-0041  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 SEP -5 PM 4:16

FILED

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

gk 7/9

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be: *The Friends of the San Marco Library, Inc.*

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Soren Brockdorf, CPA  
4362 Kelnepa Drive  
Jacksonville, FL  
32207-6226

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*To support the San Marco Library.*

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

*2/3 majority vote of officers*

## ARTICLE V INITIAL DIRECTORS/OFFICERS

The name and addresses:

*Pres*  
Soren Brockdorf, CPA  
4362 Kelnepa Drive  
Jacksonville, FL  
32207-6226

*Treas.*  
Barbara Hall  
942 Waterman Rd.  
Jacksonville FL 32207

*Sec.*  
Pat Andrews  
1863 River Rd  
Jacksonville FL  
32207

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Soren Brockdorf, CPA  
4362 Kelnepa Drive  
Jacksonville, FL  
32207-6226

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Soren Brockdorf, CPA  
4362 Kelnepa Drive  
Jacksonville, FL  
32207-6226

\*\*\*\*\*  
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.

*[Signature]*  
Signature/Registered Agent *Soren Brockdorf*

*8/31/00*  
Date

*[Signature]*  
Signature/Incorporator *Soren Brockdorf*

*8/31/00*  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA