TRANSMITTAL LETTER

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AREA OF THE STATE OF THE

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

400003396644 -09/18/00--01109--013 *****87.50 *****87.50

two (2) ies one (2) copy of the articles of incorporation and a check for: Enclosed is an original and one

\$70.00 Filing Fee

\$78.75

Filing Fee &

Certificate of

Status

\$78.75

⊠ \$87.50

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: GRANT W. MEMOWS, JR.
Name (Printed or typed)

P.O. Bux 224

904-752-1872 x 1367

Daytime Telephone number

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

ARTICLES OF INCORPORATION

O'BRIEN VOLUNTEER FIRE DEPARTMENT, INC.

A FLORIDA NOT-FOR-PROFIT CORPORATION

ARTICLE I

The name of the Corporation shall be:

The O'Brien Volunteer Fire Department, Inc.

ARTICLE II

The Principal Place of Business of the Corporation shall be:

10121 CR 349 O'Brien, FL 32071

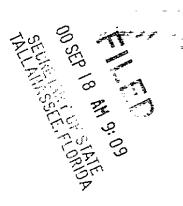
The Mailing Address of the Corporation shall be:

Post Office Box 113 O'Brien, FL 32071

ARTICLE III

This Corporation is organized under Chapter 617 Florida Statutes as a Florida Not-For-Profit Corporation for the purposes as described in Sections 501(c)(3) and/or (4) of Title 26, United States Code. It is not organized for the private gain of any person or shareholder. The purposes of the Corporation shall be as follows:

- 1. To protect the lives and property of the residents of the O'Brien, Suwannee County, Florida, Fire District by providing fire protection and other emergency services consistent with the scope and limitations of personnel training and the personnel, apparatus and equipment available.
- To assist other federal, state or county agencies and/or departments in providing fire protection and other emergency services, when and where requested.



- 3. To provide aid and comfort as available to victims of fires, accidents, floods, tornados, hurricanes and other emergencies or natural disasters.
- 4. To recruit, train and equip volunteer fire fighters and support personnel.
- 5. To provide fire prevention/safety education to the residents of the O'Brien, Suwannee County, Florida Fire District.
- 6. To be a member of the Suwannee County, Florida, Fire Services Network and to exercise all powers and perform all duties thus required.
- 7. To acquire, regulate and maintain real and personal property as required to accomplish the purposes herein stated.
- 8. To solicit, collect, receive, hold, invest, distribute and disperse donations, gifts, and/or bequests, whether monetary, real, or personal property and to enter into contracts or other agreements necessary to accomplish the purposes herein stated.
- 9. To exercise all other other powers and to perform all other tasks, proper and necessary, not prohibited by law, to accomplish the purposes hereinabove.

ARTICLE IV

The Board of Directors/Officers shall be elected by the members of the Corporation at such time and in such manner as is set forth in the Constitution and Bylaws. The number of Directors/Officers may be raised or lowered by amendment of the Constitution and Bylaws except that their number shall not be less than three (3).

ARTICLE V

The initial Directors of the Corporation shall be:

| TITLE | NAME | ADDRESS |
|--------------------------|----------------------|--|
| Chief/Director | Grant W. Meadows, Jr | 9192 226 th Street O'Brien, FL 32071 |
| Assistant Chief/Director | Robert Jones | 22080 U.S. 129 O'Brien, FL 32071 |
| Secretary/Director | Betysusan Currie | 6 Blackberry Lane O'Brien, FL 32071 |
| Treasurer/Director | Mary Wells Smith | P.O. Box O'Brien, FL 32071 |

ARTICLE VI

The initial registered agent of the Corporation and street address of said agent shall be:

Grant W. Meadows, Jr. 9192 226th Street O'Brien, FL 32071

ARTICLE VII

The name and address of the Incorporator is:

Grant W. Meadows, Jr. 9192 226th Street O'Brien, FL 32071

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SECULIVE SET, FLORIDA

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/Registered Agent

<u>/5 SEP 200</u>0 Date

Signature/Incorporator

Date