## NO2-000001114 TRANSMITTAL LETTER

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

**700004898857--**3 -02/11/02--01016--015 \*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Hudson Buildogs Association 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: Ducine A. Stevens
Name (Printed or typed)

12616 Stone House Loop

Hudson, FL. 3466M

727-8 62-418 6 Daytime Telephone number D2 FEB II PN 1:38

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

972/14

ARTICLES OF INCORPORATION	02 TA
In Compliance with Chapter 617, F.S., (Not for Profit)	
ARTICLE I NAME The name of the corporation shall be:	TO PER TO
Hudson Buildogs Association, Inc.	3
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be: 12616 STONE HOUSE LOOP HUDSON, FL. 34667	1:38 FLORIDA
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  Running a youth Football Leave, Cheeklead;  In a League with Pop Warner.	ng Fox youth Girls
ARTICLE IV MANNER OF ELECTION  The manner in which the directors are elected or appointed:  Voted on among our Idealist and People to Pop Warner to our attention.	that brought
ARTICLE V INITIAL DIRECTORS/OFFICERS  The name(s), address(es) and title(s):  RoyA.Bacc', 6304 Scabreaze Or. Port Richey, FL.  DuaneAsteurs: 12616 Stone House Loop Hudson  Tom Spivey: 13454 Hayes Rd. Spring Hill, F	34668 - President n, FL. 34667 - Vice President L. 34610- Secretary
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRE  The name and Florida street address of the registered agent is:  Owane A. Stevens  12616 Stone House Loop  Hudson, FL. 34667	<u>ess</u> .
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  ROYA. Baci 6304 Sea breaze Or.  Port Lichey, FL. 34668  **********************************	*******
Having been named as registered agent to accept service of process for the above stated corpo	oration at the place designated
in this certificate, I am familiar with and accept the appointment as registered agent and agre	
Signature/Registered Agent D	2/5/2002 ate 2/5/2002
Signature/Incorporator D	ate
- ^	