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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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08/28/03--01016--001 **70.00

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SUBJECT: WACIS	SSA SPRINGS VOLUNTEER (PROPOSED CORPORAT)		TE SUFFIX)
Enclosed is an original at \$70.00 Filing Fee	nd one(1) copy of the article \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
FROM:	710 TRAM ROAD	ADDITIONAL CO	PY REQUIRED

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

Daytime Telephone number

32361 City, State & Zip

RTICLES OF INCORPORATION -

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

ARTICLE I NAME

The name of the corporation shall be:

WACISSA SPRINGS VOLUNTEER FIRE RESCUE INC.

ARTICLE II PRINCIPAL OFFICE

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

14496 WAUKEENAH HWY. MONTICELLO, FL 32344

P.O. Box 106 WACISSA, FL 32361

ARTICLE III PURPOSE

The purpose for which the corporation is organized Volunteer Fire Department. The This Corporation is organized and operated exclusively for Educational and Charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code. Not-withstanding any other provisions of these articles the corporation shall not carry on any other activity not permitted to carry on by a corporat exempt form federal income tax under Section 501 (c)(3) on the Internal Revenue Code.

The manner in which the directors are elected or appointed:

IN ACCORDANCE WITH THE BY LAWS.

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name(s), address(es) and title(s):

JAMES R. GOMIA D/T 710 Tram Road PO Box 106 WACISSA, FL 32361

JOEY BRYAN D/O 1033 TRAM ROAD MONTICELLO, FL 32344

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JAMES R. GOMIA 710 Tram Road PO BOX 106

WACISSA, FL 32361 ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

JOEY BRYAN 1033 TRAM ROAD MONTICELLO, FL 32344

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.

iture/Registered Agent

8/26/2003

Date