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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 MAR 14 PM 3:36

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## TRANSMITTAL LETTER

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

SUBJECT: CERTIFIED DERELICT MOTORCYCLE CLUB 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: WILLIAM E. WATTERSON  
Name (Printed or typed)

4832 96TH STREET NORTH  
Address

ST. PETERSBURG FL. 33708  
City, State & Zip

(727) 392-8236  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

CERTIFIED DERELICT MOTORCYCLE CLUB INC.

**ARTICLE II PRINCIPAL OFFICE**

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

4832 96TH STREET NORTH  
ST. PETERSBURG FL. 33708 US

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

THE CORPORATION SHALL ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED  
UNDER THE LAWS OF THE UNITED STATES AND OF THE STATE OF FLORIDA  
MAINLY TO OPERATE AS A MOTORCYCLE CLUB.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

THE DIRECTORS SHALL BE ELECTED BY A MAJORITY VOTE OF THE MEMBERS  
OF THIS CORPORATION.

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

List name(s), address(es) and specific title(s):

TITLE: P  
WILLIAM E. WATTERSON  
4832 96TH STREET NORTH  
ST. PETERSBURG FL. 33708 US

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

WILLIAM E. WATTERSON  
4832 96TH STREET NORTH  
ST. PETERSBURG FL. 33708

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

WILLIAM E. WATTERSON  
4832 96TH STREET NORTH  
ST. PETERSBURG FL. 33708

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\*\*\*\*\*  
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.

William E. Watterson  
Signature/Registered Agent

WILLIAM E. WATTERSON

3/11/05  
Date

William E. Watterson  
Signature/Incorporator

WILLIAM E. WATTERSON

3/11/05  
Date