N0600003605

| (Requestor's Name) | - | | |
|---|---|--|--|
| (Address) | - | | |
| (Address) | - | | |
| (City/State/Zip/Phone #) | - | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | - | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | - | | |
| Special Instructions to Filing Officer: | | | |
| Nob 13529 | | | |



600067774726

03/17/06--01014--015 **87.50

PILED 2006 APR -3 AN 7: 38 SECRETAIN OF STATE

Office Use Only

Seem APR 4 2009

COVER LETTER

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

SUBJECT: VICTORY RIBERS ASSOCIATION OF SOUTH FLORIDA LLC

(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

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: BOB HAWSEN

Name (Printed or typed)

1604 NW 102 WAY

CONAL SPRINGS FL 33871
City, State & Zip

3 0 5 63 V 2 V 8/

Daytime Telephone number

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



RECEIVED

FLORIDA DEPARTMENT OF STATE 05 198 -4 PH 2: 06 Division of Corporations

March 20, 2006

BOB HANSEN 1604 NW 102 WAY CORAL SPRINGS, FL 33071

SUBJECT: VICTORY RIDES ASSOCIATION OF SOUTH FLORIDA LLC

Ref. Number: W06000013329

We have received your document for VICTORY RIDES ASSOCIATION OF SOUTH FLORIDA LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please remove the suffix LLC and use one that is listed below.

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the corporation is being organized.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Document Specialist New Filing Section

Letter Number: 006A00018870

ARTICLES OF INCORPORATION

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

| • | The name of the corporation shall be: | |
|-------|---|-------------|
| | VICTORY MIDERS ASSOCIATION OF SOUTH FLORIDAL | 1 |
| | | WC |
| | ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: | |
| | CORAL SPRINGS FL 33071 | 1. A NO |
| | ARTICLE III PURPOSE | SECTALL |
| | The purpose for which the corporation is organized is: AN ONGANIZATION COMPOSED OF VICTORY | 盖第三 |
| | MOTORCYCLE PUBERS TO EXCOUNTED | ARY CHASSEE |
| | SAFE MOTORICICIE 140176 | |
| | ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected or appointed: | ORDER 3 |
| | AN ANNVAL ELECTION WITH SHOW OF HAND- | Ç≌ ∞ |
| | ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected or appointed: AN ANNUAL ELECTION WITH SHOW OF HAND- | |
| | ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS | |
| | List name(s) address(es) and specific title(s): | 7207/ |
| PRES | - BOB HANSEN 1604 NW 102 WAY COMPLES FL - AL KARSTEN 5530 SW 8 STREET MANGATE FL | 33068 |
| | | |
| TREAS | SUMER - BILL TUENS 840 SOUTH ANDREWS AVE POMPAND DEAD | # 76 3386 |
| | ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS | |
| | The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: | |
| | BOB HANSEN 1604 NW 102 WAT CORAL SARIPS FL | - 3307/ |
| | ARTICLE VII INCORPORATOR | |
| | The name and address of the Incomprator is: | 1 |
| | BOB HANSEN 1604 NW 102 WAT CORAL SPRINGS FL | 33071 |
| | | • |
| | *********** | |
| | Having been named as registered agent to accept service of process for the above stated corporation at the pin this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this | |
| نعد | March | 142006 |
| | Signature Registered Agent Bob Hapsen Date | 1-cus |
| | X 0-11 | |
| ۷. | Signature Incorporator P / 1/2 15 5 / Date | 14,2006 |
| ; | Signature Incorporator Bob HANSEN Date | |