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INTSIDE OF CORPORATION
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SECRETARY OF STATE
TALLAHASSEE, FI GBL

Traditati

• CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 \* Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Tri-County	area Safety Council, Inc	<u></u>	
		Art of Inc. File	
		LTD Partnership File	
		Foreign Corp. File	
		L.C. File	
		Fictitious Name File	
		Trade/Service Mark	
		Merger File	
		Art. of Amend. File	
		RA Resignation	
		Dissolution / Withdrawal	
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

07 JAN 31 PM 1: 52

DEPARTMENT OF STATE OIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

January 17, 2007

CAPITAL CONNECTION INC

ATTN: SP

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE.

SUBJECT: TRI-COUNTY AREA SAFETY COUNCIL, NC.

Ref. Number: W0700002464

The entity you have listed as the owner of the mark has been involuntarily dissolved or administratively dissolved and must be reinstated prior to registration of the mark.

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

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) 245-6855.

Tammy Hampton Document Specialist New Filing Section

Letter Number: 107A00003756

RE-SUBMIT PLEASE OBTAIN THE ORIGINAL FILE DATE.

#### ARTICLES OF INCORPORATION:

#### TRI-COUNTY AREA SAFETY COUNCIL

DIVISION OF LCHA CORE GROUP

ARTICLE ONE.

**NAME** 

2007 JAN 16 PM 12: 29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The name of this corporation is Tri-County Area Safety Council, Inc.

#### ARTICLE TWO.

#### **OBJECTS AND PURPOSES**

The objects and purposes for which this corporation is formed are:

To conduct and transact generally the business of traffic and safety education. and to do all things and exercise all powers and perform all functions that a non-profit corporation is authorized or empowered to do, exercise, or perform under and by virtue of the laws of Florida, or that it may be by law hereafter authorized to do, exercise, or perform; traffic and health education and do all the above things as a non-profit corporation and insofar as is consistent with the laws of Florida.

#### ARTICLE THREE.

#### LOCATION OF PRINCIPAL OFFICE

The principal office for the transaction of business of this corporation is to be located 4 West Park Avenue, Chiefland, Levy County, Florida, 32626.

#### ARTICLE FOUR.

#### REGISTERED AGENT

The registered agent for service of process upon the corporation is:

Name

Address in [state]

Robert L. Williams

11590 NW 68th Terrace, Chiefland, Florida 32626

#### ARTICLE FIVE

#### **DIRECTORS**

The number of directors of the corporation is three the following are the names and residences of the persons appointed to act as directors until their successors are elected and qualified:

Names	Residences
Robert L. Williams	11590 NW 68th Terrace, Chiefland, Florida 32626
Debra J. Houska	500 W. Park Avenue, #906, Chiefland, FL 32626
Christina Holland	621 Pine Street, Bronson, FL, 32621

#### **ARTICLE SIX**

#### **DURATION OF CORPORATE EXISTENCE**

The corporate existence of this corporation shall continue perpetually.

In witness whereof, we, the incorporators, have set our hands and seals on January 9, 2007.

Dubia Mouska

[Seals]

[Acknowledgment]



#### CERTIFICATE OF DESIGNATION

### REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: _	TRI County AREA Safety Council, In
2. The name and street address of the	te registered agent and office is: RUBERT L. WILLIAM S
Chieffand, H.	

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Colect & Williams