

N07000003773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

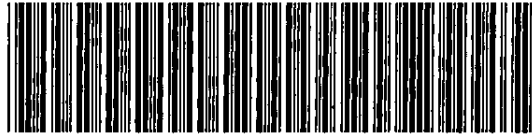
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07 APR 13 PM 3:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE APR 13 2007

COVER LETTER

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

SUBJECT: Kiwanis of Dr. Phillips, 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: Amy Rode c/o Fairwinds Credit Union
Name (Printed or typed)

7541-B W Sandlake Rd.
Address

Orlando, FL 32819
City, State & Zip

321-388-2066
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:

Kiwanis of Dr. Phillips Inc.

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ARTICLE II PRINCIPAL OFFICE

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

4625 Aguila Place
Orlando, FL 32826

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To organize fundraisers for the children in our local area

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Annually nominated and elected.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Keith Carrington, President 4625 Aguila Place Orlando, FL 32826 - also Director
Amy Rode, Treasurer 7541-B W Sandlake Rd. Orlando, FL 32819 - also Director
Agdamarys Rosado, Director 7625 Sandlake Rd. Orlando, FL 32819

Harlan Silverman, Secretary, 4847 Landover Circle, Orlando, FL 32821

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Keith Carrington
4625 Aguila Place
Orlando FL 32826

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Amy Rode
c/o Fairwinds Credit Union
7541-B W Sandlake Rd.
Orlando, FL 32819

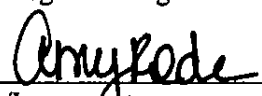
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent

4.1.07

Date



Signature/Incorporator

4.1.07

Date