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FOR NON-PROFIT CORP. 30	
FOR NON-PROFIT CORP. 30 BL	
ARTICLE I	00
The name of this organization shall be the RNHA Control + lorida Joc.	,
(herein referred to as "the Chapter") Winter Springs Blud	
adopted on June 912, 1992 co. 7	

#### ARTICLE II — PURPOSE

SECTION 1. To make known and promote the principles of the Republican Party among the Hispanic community of <u>Seminale</u>, Olange, Brancal Use 1 - Volume County

**SECTION 3.** To aid in the election of Republican candidates at all levels of government.

**SECTION 4.** To develop political skills and leadership abilities among Republican Hispanic as preparation for future service by them to the party and the community.

#### ARTICLE III — OFFICERS

**SECTION 1.** The officers of the Chapter shall be a Chairman, First-Chairman, Second Vice-Chairman, Secretary, and Treasurer.

**SECTION 2.** The officers shall be elected at the regular Chapter meeting not later than (2) two weeks after the primary election of the State. No proxy may be voted at this nor any other meeting of the Chapter.

**SECTION 3.** Notice that the election of Chapter officers will occur at the regular meeting must be reasonable provided to all Chapter members not less than ten (10) days prior to such meeting.

**SECTION 4.** Nominations of candidates for Chapter officers positions shall be made from the floor by any Chapter member in good standing.

#### ARTICLE V — REGULAR MEETINGS

**SECTION 1.** The Chapter shall hold regular meetings not less than six a year, at least once every two months.

**SECTION 2.** Regular meetings may be held at the held at the call of the Chairman or of any three Chapter officers. Notice if a regular meeting shall be given to all Chapter members by mail not less than one week prior to the meeting.

**SECTION 3.** A quorum for regular meetings shall be ten (10) percent of the membership, but in no case less than five (5).

#### **ARTICLE VI — DUES**

Each member shall pay \$30.00 dues per two year period and shall not be entitled to vote at Chapter meetings until his dues shall have been paid in full. All dues shall be forwarded to the National RNHA office half of which shall be returned to the State RNHA.

#### ARTICLE VII — IMPEACHMENT

Any officer may be impeached for failure to attend two consecutive Executive Board meetings perform his prescribed duties properly and in good faith. Upon unanimous vote of the other officers at a regular meetings, and officer shall be removed from his position. The position shall remain vacant until the next regular meetings when an election to fill the vacancy, as may any other Chapter member in good standing.

#### **ARTICLE VIII**

#### **ARTICLE IX**

Amendments to this Constitution may be adopted upon an affirmative vote by two-thirds (2/3) of those present and voting at two successive regular Chapter meetings.

## OFFICER - DIRECTOR INFORMATION

PI	RESIDENTY DIRECTOR						
Name any C	Leved						
Physical Address (please no P.O. Box) 1103 しん	te Spuip Blud						
City Wenter Spays	State						
Home Phone 407 -699-019	Home Fax 407-699-019						
	Work Fax						
Cell Phone 407-314-1344	Pager						
Email Home NACEV 17618 OF	Email Work						
VICE-PRESIDENT/DIRECTOR							
Name hill	υ <u>η</u>						
Physical Address / 05 (please no P.O. Box)	Tedworth CT						
City LONG WOO d	State FL Zip 32 779						
Home Phone 407-786-9319	Home Fax						
Work Phone	Work Fax						
Cell Phone 407-493-73/	Pager						
Email Home (Tridlock 94 82 /4							

### **SECRETARY:**

Name Mary of Percer Riss	
Physical Address (please no P.O. Box) 1103 Willer Spring Blod	
City State Zip 32700	_
Home Phone 407-699-0191 Home Fax 407-699-0191	_
Work Phone Work Fax	_
Cell Phone Pager	•••
Email Home Email Work	<del></del>
TREASURER/DIRECTOR	
Name Alberto A- Leverto	
Physical Address (please no P.O. Box) 1103 Water Sprays Blod  City Water Spray State T-1/Zip 32708	
City Water Spub State T-1. Zip 32708	-
Home Phone 407-699-0191 Home Fax 407-699-0191	· ·
Work Phone Work Fax	
Email Home Acerclo Mulsan 2 DAOL Email Work	<u></u>
KORPORATOR: Namay C. Acevedo	_ (NAME)
1103 Winter Spring Blvd	_ (ADORESS)
Winter Spren of F1. 32708	1,7
SIGNATURE DA	ATE

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED 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	nn is
1.	1110	Hanne	or me	COLPOTATION	711 I2

RNHA Control + rido Jaco (must include suffix)

2. The name and address of the registered agent and office is:

Many C. Aceved 1103 Winter Springs Blod

Winter Spreng - 3 2708

Having been named as registered agent and to accept service of process for the above stated 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.

(SIGNATI DT)

8/4/17

(DATE)