

NO8000006398

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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

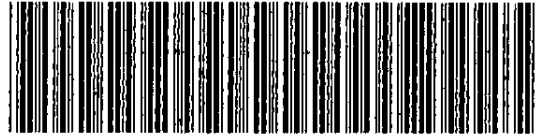
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06/20/08--01013--003 \*\*43.75

07/07/08--01052--002 \*\*35.00

FILED  
08 JUL - 7 PM 2:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 24, 2008

STEVE HILL  
3521 MIRAMONTES CIRCLE  
WELLINGTON, FL 33414

SUBJECT: INTERNATIONAL ASSOCIATION OF FIREFIGHTERS LOCAL 1673  
DEERFIELD BEACH FIREFIGHTERS AND PARAMEDIES  
Ref. Number: W08000030336

We have received your document for INTERNATIONAL ASSOCIATION OF FIREFIGHTERS LOCAL 1673 DEERFIELD BEACH FIREFIGHTERS AND PARAMEDIES and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$35.00.

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 corporate fees are as follows:

**CORPORATIONS FILING FEES**

Profit and NonProfit  
Florida & Foreign Corp.

Filing Fees	\$35.00
Registered Agent Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

Please return 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) 245-6934.

Loria Poole  
Regulatory Specialist II

Letter Number: 808A00038014

## COVER LETTER

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

SUBJECT: International Association of Firefighters Local 1673 Deerfield Beach  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Firefighters  
IRS - 501 (c) (5)

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

\$35.00  
+ 8.75  
\$43.75

FROM: Steve Hill  
Name (Printed or typed)

3521 Miramonte Circle  
Address

Wellington FL 33414  
City, State & Zip

561-798-2889  
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: *International Association of Firefighters  
Local 1673 Deerfield Beach Firefighters and  
Paramedics Inc*

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

*1441 FAU Research Pkwy  
Deerfield Beach FL 33441*

*Mailing  
P.O. Box 4143  
Deerfield Beach FL 33442*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*Represent all persons engaged in firefighting or fire prevention, who are  
paid employees of the Deerfield Beach Fire Department, from Battalion  
Chief to Firefighter*

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed: *Secret Ballot Vote*

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

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

*President  
Sean Crofutt  
745 NW 41 Terr  
Deerfield Beach FL 33442*

*V.P.  
Sean Pacitti  
4121 NE 25 Ave  
Lighthouse Point FL 33064*

*Secretary/Treas  
Steve Hill  
3521 Miramontes  
Circle  
Wellington FL 33414*

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

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

*Steve Hill 3521 Miramontes Circle  
Wellington FL 33414*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*Steve Hill  
3521 Miramontes Circle  
Wellington FL 33414*

\*\*\*\*\*  
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.

*Steph Hill*  
\_\_\_\_\_  
Signature/Registered Agent

*6/18/08*  
\_\_\_\_\_  
Date

*Steph Hill*  
\_\_\_\_\_  
Signature/Incorporator

*6/18/08*  
\_\_\_\_\_  
Date

FILED  
08 JUL -7 PM 2:55  
CLERK OF STATE  
TALLAHASSEE, FLORIDA