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## COVER LETTER

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

SUBJECT: Son's of The American Legion Saundron (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 &

Status

\$78.75 Certificate of

\$87.50

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Kirk T. Miller
Name (Printed or typed)

360 W, Ison

Address

Doned, N FL, 34698

City, State & Zip

727-479-6337 (ceL)

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:	1 10 7 7 7 11
Son's of the American Legian S	quadron 275, 1 NC
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation sh	nall be:
360 W/150NST.	
Dunedin FL. 34698	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
To ASSIST the Legion And To help	
The community by supporting charities	s, schools a Needy
ARTICLE IV MANNER OF ELECTION	•
The manner in which the directors are elected or appointed:	
BAlloT ELection	
	= -
	OR DEC
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS	
List name(s), address(es) and specific title(s):	
Pres, Commandor = Kirk T. Miller	22 1888
STANCE = BILL KALLBERG	PH L: 1.3 SEE, FLORIDA
Sec. ADJUANT = Gerald Show	
2 - ADTUANT - GOOD Show	
TYES FINANCE = DON BANTOLONG	<u>క్</u> డ్ ప్
	<b>1</b>
The name and Florida street address (P.O. Pay NOT acceptable) of the	
The <u>name and Florida street address</u> (P.O. Box <b>NOT</b> acceptable) of th	e registered agent is:
KIRK T. MIller 2044 HARVARD AUE.	
2044 445040	
DUNEDIN FL. 34698 ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
•	
KINK J. Miller 360 wilsonst	
360 61234	
Dunidin FL 34698 ************************************	********
Having been named as registered agent to accept service of process for the above s	tated corporation at the place designated
in this certificate, I am familiar with and accept the appointment as registered agei	nt and agree to act in this capacity.
N. A. M. M.	10/15/08
Signature/Registered Agent	12/17/08 Date 12/17/08
Signature/Registered Agent	Date
IL . U. M. FIL	12/17/08
- 1 Str. 1. CIII	12/17/08
Signature/Incorporator	Date