

N 09000000589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

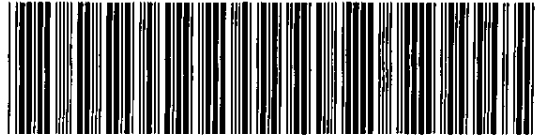
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2009 JAN 20 PM 1:47

1/21/09

**COVER LETTER**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2009 JAN 20 PM 1:47

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

SUBJECT: VFW Post 7991 Men's Auxiliary 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: Christopher Thomas  
Name (Printed or typed)

3107 W Dunnellon Rd.  
Address

Dunnellon FL 34433-3004  
City, State & Zip

(352) 489-1772  
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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

## ARTICLE I NAME

The name of the corporation shall be:

VFW Post 7991 Men's Auxiliary Inc.

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## ARTICLE II PRINCIPAL OFFICE

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

3107 W Dunnellon Rd.  
Dunnellon FL 34433-3004

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Service to Veterans

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Electoral Vote

## ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Joseph Hebert 3107 W Dunnellon Rd. Dunnellon FL 34433-3004 (President)  
Ronald Johnson 3107 W Dunnellon Rd. Dunnellon FL 34433-3004 (Sr. Vice President)  
Christopher Thomas 3107 W Dunnellon Rd. Dunnellon FL 34433-3004 (Treasurer)

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Christopher Thomas  
3107 W Dunnellon Rd.  
Dunnellon FL 34433-3004

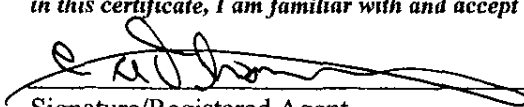
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

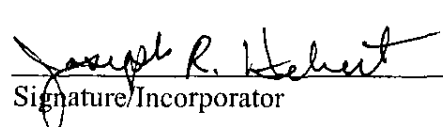
Joseph Hebert  
3107 W Dunnellon Rd.  
Dunnellon FL 34433-3004

\*\*\*\*\*

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

\_\_\_\_\_  
Date

  
Signature/Incorporator

\_\_\_\_\_  
Date