

**N09000005390**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

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

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

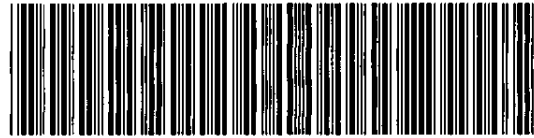
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

~~W09-21650~~

Office Use Only

*[Signature]* 6/3



**400155336294**

05/06/09--01027--015 \*\*87.50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 JUN -P PM 2:49

APPROVED  
AND  
FILED

## COVER LETTER

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

SUBJECT: Tri-County Umpires Association 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:

ROS LARSEN

Name (Printed or typed)

8845 93<sup>RD</sup> AVE

Address

VENO BEACH FL 32967

City, State & Zip

772-473-2052

Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 7, 2009

ROBS LARSEN  
8845 93RD AVE.  
VERO BEACH, FL 32967

RECEIVED JUN - 1 2009  
*[Handwritten signature]*

SUBJECT: TRI-COUNTY UMPIRES ASSOCIATION INC  
Ref. Number: W09000021650

We have received your document for TRI-COUNTY UMPIRES ASSOCIATION INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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: 809A00015585

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

*Tri-County Umpires Association Inc.*

**ARTICLE II PRINCIPAL OFFICE**

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

*8845 93<sup>rd</sup> AVE VERO BEACH, FL 32967*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*Youth baseball umpiring.*

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

*Appointed*

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

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

*Rick Stone 6103 Palm Drive, Ft. Pierce, FL, 34982 - Pres-  
Tom Davey 1514 25<sup>th</sup> Ave, Vero Beach, FL, 32960 - Vice-Pres-  
Rob Larsen 8845 93<sup>rd</sup> AVE, VERO BEACH, FL 32967 - 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:

*Rob Larsen 8845 93<sup>rd</sup> AVE VERO BEACH, FL 32967  
TREASURER*

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

*Rick Stone 6103 Palm Drive, Ft. Pierce, FL, 34981 - Pres*

\*\*\*\*\*  
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

*[Signature] - Treasurer*  
*[Signature] - President*  
*[Signature] - Vice President*

*4/25/09*  
*April 19, 2009*  
*4-19-2009*

09 JUN - 1 PM 2:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED