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(Business Entity Name)

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DIVISION OF CORPORATIONS
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FILED
09 DEC -7 PM 1:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Madison Chamber of Commerce 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: Cindy Poire'
Name (Printed or typed)

249 SW Range Ave Ste B
Address

Madison Florida 32340
City, State & Zip

850-253-0261
Daytime Telephone number

Chamber@visitmadisonfl.com
E-mail address: (to be used for future annual report notification)

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:

Madison Chamber of Commerce Inc.

ARTICLE II PRINCIPAL OFFICE

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

249 SW Range Ave Ste B., Madison, FL 32340

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to serve the Madison County businesses & merchants

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Election by members

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Cindy Poire - Pres. - 249 SW Range Ave Ste B., Madison, FL 32340

Ruthellen Caldwell - Treasurer - 249 SW Range Ave Ste B, Madison, FL 32340

June Spear - Secretary - 249 SW Range Ave., Ste B., Madison, FL 32340

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Cindy Poire

197 SW Range Ave, Madison, FL 32340

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Cindy Poire

197 SW Range Ave, Madison, FL 32340

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.

Cindy Poire
Signature/Registered Agent

12/3/09
Date

Cindy Poire
Signature/Incorporator

12/3/09
Date

FILED
09 DEC -7 PM 1:21
CLERK OF STATE
TALLAHASSEE, FLORIDA