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\_\_\_\_\_  
(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:

Office Use Only



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04/29/10--01024--002 \*\*70.00

RECEIVED  
10 APR 29 AM 11:41  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
10 APR 29 AM 11:58  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: BACKYARD BAR-B-QUE FEST  
(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: ESTELLE MCKAY  
Name (Printed or typed)

9871 Timmons Rd  
Address

Tallahassee FL 32392  
City, State & Zip

(813) 385-1191  
Daytime Telephone number

ESTELLE.M@Tampabay.FL.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:

BACKYARD BAR-B-QUE FEST, Inc

## ARTICLE II PRINCIPAL OFFICE

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

9871 Timmons Rd  
~~1400~~ THONOTOSASSA FL. 33592

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Scholarship Fund Raising Event  
Support & Encourage Students Thru to Post Secondary School

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Noted By Members

## ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

CURT L. MCKAY (PRESIDENT)  
ESTELLE MCKAY (VICE PRESIDENT)

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ESTELLE MCKAY  
9871 Timmons Rd  
THONOTOSASSA FL. 33592

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Estelle McKay  
9871 Timmons Rd  
THONOTOSASSA FL. 33592

\*\*\*\*\*

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

4/29/10

Signature/Incorporator

Date

4/29/10

FILED  
10 APR 29 AM 11:58  
CLERK OF STATE  
TALLAHASSEE, FLORIDA