



**COVER LETTER**

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

**SUBJECT:** PFLAG New Smyrna Beach/Volusia  
**(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:** Kathy Seibert  
Name (Printed or typed)

19 Highland Falls Dr  
Address

Ormond Beach FL 32174  
City, State & Zip

386.299.0698  
Daytime Telephone number

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

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
10 JUN 18 AM 10:02  
FLORIDA DEPARTMENT OF STATE  
CORPORATION DIVISION  
TALLAHASSEE, FLORIDA

June 10, 2010

KATHY SEIBERT  
19 HIGHLAND FALLS DR  
ORMOND BEACH, FL 32174

SUBJECT: PFLAG NEW SMYRNA BEACH / VOLUSIA  
Ref. Number: W10000027895

We have received your document for PFLAG NEW SMYRNA BEACH / VOLUSIA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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) 245-6869.

Christine Haney  
Senior Clerk  
New Filing Section

Letter Number: 210A00014402



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
10 JUL -2 AM 10:31  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

June 18, 2010

KATHY SEIBERT \*\*2ND REJECT\*\*  
19 HIGHLAND FALLS DR  
ORMOND BEACH, FL 32174

SUBJECT: PFLAG NEW SMYRNA BEACH / VOLUSIA  
Ref. Number: W10000027895

We have received your document for PFLAG NEW SMYRNA BEACH / VOLUSIA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the corrected original and one copy of 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) 245-6869.

Christine Haney  
Senior Clerk  
New Filing Section

Letter Number: 210A00014402

*Kathy, I guess we overlooked this, but  
I would suggest yourself being the Inc  
and you can sign at the bottom.*

*John,  
C Haney*

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

2ND UPDATE

**ARTICLE I NAME**

The name of the corporation shall be:  
PFLAG New Smyrna Beach/Volusia Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:  
19 Highland Falls Dr, Ormond Beach FL 32174

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Education

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:  
Chapter board members are invited to serve on the board

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

List name(s), address(es) and specific title(s):  
Kathy Seibert, 19 Highland Falls Dr, Ormond Beach FL 32174, President  
Judy Provost, 1805 Beacon St, New Smyrna Beach FL 32169, Secretary  
Sarah Lund, 203 Washington St, New Smyrna Beach FL 32169, 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:  
Kathy Seibert, 19 Highland Falls Dr, Ormond Beach FL 32174

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
Kathy Seibert, 19 Highland Falls Dr, Ormond Beach FL 32174

FILED  
10 JUL -2 AM 11:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*\*\*  
*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.*

K Seibert  
Signature/Registered Agent

06/30/2010  
Date

K Seibert  
Signature/Incorporator

\_\_\_\_\_  
Date