## N11000001665

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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to Filling Officer.				
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SECRETARY OF STATE

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## **COVER LETTER**

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

SUBJECT: Beach Arts Cooperative Inc.						
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )						
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 C	OPY REQUIRED			
FROM:	Sherwood M. Coo	pper Jr. DVM rinted or typed)				
16731 McGrogor Rhyd #115						

239-872-8281
16731 Md@netionesTvele#hose number

DocCoop25@juno.com

Fort Myers, Florida, 33908 City, State & Zip

E-mail address: (to be used for future annual report notification)

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

## ADTICLES OF INCORDODATION

The name of the corporation shall be:    PRINCIPAL OFFICE   Principal street address   Principal street   Principal street   Principal street   Principal st		In compliance with Chapte		or Profit) 11 FEB 15 5
16731 McGregor Blvd, #115   Eart Myers, Florida 33908			ERATIVE INC	or Profit)  11 FEB 15 PH 3: 22  SECRETARY OF STATE
16731 McGregor Blvd. #115 Ent Myers, Florida 33908  ARTICLE III PURPOSE The purpose for which the corporation is organized is: For the enhancement of performing and visual arts in the community  ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Five(5) or more votes to make a quarum ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title: Mark List- President Address:  202 Crescent Street(Box#2851) Address: Fort Myers Beach, Florida 33932  Name and Title: Shenwood M. Cooper Jr. DVM Address: Vica President Address: Vica President Address: Vica President Address: 196 Anchorage Street 16731 McGregor Blvd. #115 Fort Myers Florida 33908  Name and Title: Carrie Hill - TREASURER Address: 13422 Heald Lane #8 Fort Myers Beach, Florida 33931  ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Sherwood M. Cooper Jr. DVM Address: 16731 McGregor Blvd. #115 Fort Myers, Florida 33908  ARTICLE VI INCORPORATOR  The name and address of the Incorporator is: Name: Mark List Address: P.O. Box 2851 Fort Myers Beach, Florida 33992  Having been named as resistant® geent to accept service of process for the above stated corporation at the place designated in the Having been named as resistant® geent to accept service of process for the above stated corporation at the place designated in the Having been named as resistant® geent to accept service of process for the above stated corporation at the place designated in the Having been named as resistant® geent to accept service of process for the above stated corporation at the place designated in the Having been named as resistant® geent to accept service of process for the above stated corporation at the place designated in the place d	ARTICLE II	PRINCIPAL OFFICE		MASSEE, FLORIDA
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Name and Title: Carrie Hill - TRUBURER   Name and Title: Carrie Hill - TRUBURER   Address:   220 Fairweather Lane   Address:   13422 Heald Lane #8   Fort Myers Beach, Florida   33931   Say 208   Name and Title: Amanda Parke   Address:   13422 Heald Lane #8   Fort Myers, Florida   33908      ARTICLE VI   REGISTERED AGENT   The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name:   Sherwood M. Cooper Jr. DVM   Address:   16731 McGregor Blvd. #115   Fort Myers, Florida   33908				
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certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	Having been nan	ned as registered agent to accept service of proce	ess for the above s	stated corporation at the place designated in this
1 1 h-1%	certificate, I am fo	amiliar with and accept the appointment as register	red agent and agree	e to act in this capacity
12/14/2010		/ // //// / Din		12/14/2010
Required Signature of Registered Agent Date		Required Supportre of Registered Agent		<del> </del>
Date		required bigignate of registered Agent		Date

I submit this/document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

> 12/14/2010 equired Signature of Incorporator Date