

N11000000 3650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

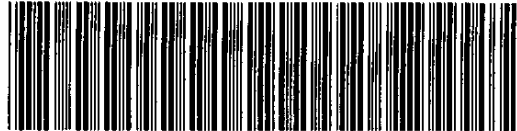
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300200645383

04/08/11--01013--003 **78.75

FILED
11 APR -8 PM 1:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: BAY AREA GOLF CLUB OF FLORIDA, 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: Emidio J. Germino c/o JJ Tax Accounting LLC
Name (Printed or typed)

18134 Sandy Pointe Dr.
Address

TAMPA, FL 33647
City, State & Zip

(813) 907-0239
City, State Telephone number

emenggermino@yahoo.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)

FILED

ARTICLE I NAME BAY AREA GOLF CLUB OF FLORIDA, INC.
The name of the corporation shall be:

11 APR -8 PM 1:16

ARTICLE II PRINCIPAL OFFICE
Principal street address
8303 N 46TH STREET
TAMPA, FL 33617

Mailing address, if different is:
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

for pleasure, social & recreation and other non-profitable purposes, supported solely by membership fee, dues and assessment. No part of the net earnings, if any will inure to the benefit of the officers & directors. The corporation also deals with any and all lawful businesses.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

By vote

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: FRANCISCO T. ESTRADA, President Name and Title: BAS GARCIA, Asst. Secretary/Treasurer
Address: 8303 N 46th Street Address: 8303 N. 46TH ST.
Tampa, FL 33617 Tampa, FL 33617

Name and Title: VER BAUTISTA, Vice President Name and Title: _____
Address: 4680 80 AVE. Address: _____
PINELLAS PARK, FL 33781

Name and Title: ROY BRITO, Secretary/Treasurer Name and Title: _____
Address: 7555 131st ST. N. Address: _____
SEMINOLE, FL 33776

ARTICLE VI REGISTERED AGENT

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

Name: EMIDIO J. GERMINO.
Address: 18134 Sandy Pointe Dr.
Tampa, FL 33647

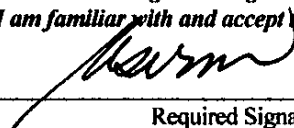
11 APR -8 PM 1:16
FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: FRANK T. ESTRADA
Address: 8303 N 46TH STREET
TAMPA, FL 33617

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



Required Signature of Registered Agent

4 APRIL 2011

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.



Required Signature of Incorporator

4 APRIL 2011

Date