

N1100009629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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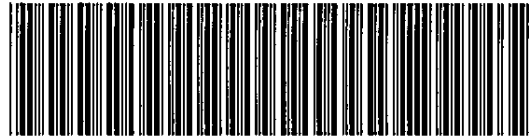
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 OCT 11 PM 12:56

Rs 10/12/11

COVER LETTER

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

SUBJECT: _____

McCUE FOR MAYOR, 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: _____

TAX ADVANTAGE, INC.
Name (Printed or typed)

1201 N. 3RD ST

Address

JACKSONVILLE BEACH, FL 32250

City, State & Zip

904-241-0050

Daytime Telephone number

*

McCUE FORMAYOR@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)

ARTICLE I NAME

The name of the corporation shall be:

McCUE FOR Mayor, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

537 15th AVE N
JACKSONVILLE BEACH, FL 32250

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

POLITICAL CAMPAIGN FUND

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

MAJORITY VOTE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MITCHELL McCUE, PRES

Address: 537 15th AVE N
JACKSONVILLE BEACH, FL 32250

Name and Title:

Address:

Name and Title: JENNIFER HUBER, TREAS.

* Address: 458 10th AVE S
JACKSONVILLE, FL 32250

Name and Title:

Address:

Name and Title: KENNY FOLETTE, SEC.

* Address: 1034 MARVONE LN
NEPTUNE BEACH, FL 32266

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

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

Name: MITCHELL McCUE
Address: 537 15th AVE N
JACKSONVILLE BEACH, FL 32250

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MITCHELL McCUE
Address: 537 15th AVE N
JACKSONVILLE BEACH, FL 32250

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

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

Date

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