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DECEMBER

11 OCT 24 PM 12:33

UNITED STATES DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D. C. 20535

100

11 OCT 24 PM 12:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Big Bend Clean Cities Coalition, 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: Robert W Wilson

Name (Printed or typed)

113 East College Avenue, Suite 200

Address

Tallahassee FL 32301

City, State & Zip

850-514-5183

113 East College Avenue, Suite 200
Tallahassee, FL 32301

rwilson@wilsonmgmt.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: **Big Bend Clean Cities Coalition, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
113 East College Avenue, Suite 200
Tallahassee
Florida 32301

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To develop public/private partnerships to promote alternative fuels and vehicles, vehicle blends, fuel economy, and idle reduction.

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

All directors other than the initial directors and the President of the Corporation shall be elected by the membership present at the annual meeting or as otherwise determined by the Board, in accordance with the method of election stated in the bylaws of the corporation.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert W. Wilson, President
Address: 113 East College Avenue, Suite 200
Tallahassee
Florida 32301

Name and Title: _____
Address: _____

Name and Title: Vicki O'Neil, Vice President
Address: 2602 Jackson Bluff Road
Tallahassee
Florida 32304

Name and Title: _____
Address: _____

Name and Title: Don Gates, Secretary/ Treasurer
Address: 3127 West Tennessee Street
Tallahassee
Florida 32304

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

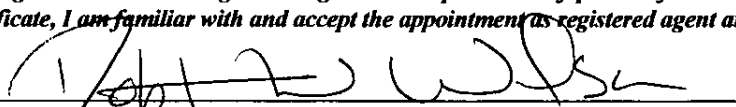
Name: Robert W. Wilson
Address: 113 east College Avenue Suite 200
Tallahassee
Florida 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Robert W. Wilson
Address: 113 East College Avenue, Suite 200
Tallahassee
Florida 32301

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

10.24.11
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

10.24.11
Date

FILED
11 OCT 24 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA