

NI 200000252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

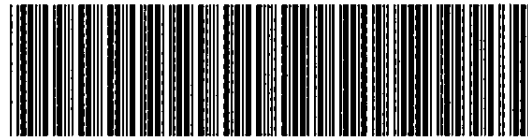
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/27/11--01029--012 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN -9 PM 3:47

Re 1/12/13 211-64000



RECEIVED

12 JAN -9 PM 1:55

FLORIDA DEPARTMENT OF STATE ~~OF CORPORATIONS~~
Division of Corporations

December 29, 2011

KATHY MCCOLLOUGH
225 WALKER CIRCLE
CRESTVIEW, FL 32539

SUBJECT: JAMES MCCOLLOUGH POST 395
Ref. Number: W11000064006

We have received your document for JAMES MCCOLLOUGH POST 395 and your check(s) totaling \$78.75. 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 purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

You must list at least one incorporator with a complete business street address.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return 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) 245-6901.

Pamela Smith
Regulatory Specialist II

Letter Number: 311A00028710

COVER LETTER

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

SUBJECT: James McCollough Post 395
(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 McCollough
Name (Printed or typed)

225 Walker Circle
Address

Crestview Fl 32539
City, State & Zip

850. 830.2340
Daytime Telephone number

MacSKAT29@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
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 JAN -9 PH 3:47

ARTICLE I NAME

The name of the corporation shall be: James McCollough Post #395 INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

225 Walker Circle

Crestview FL 32539

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Non-Profit Organization that provides various services for area veterans, to include but not limited to Employment assistance, monetary assistance for families with hardships and help understanding and filing for disability compensation.

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

Ballot

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alfonso Plummer

Address: Commander

213 Citadel Lane

Crestview Florida 32539

Name and Title: Ralph Collins

Address: Vice Commander

6267 Equine Dr.

Crestview Florida 32536

Name and Title: Kathy McCollough

Address: Adjutant

225 Walker Circle

Crestview Florida

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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: Kathy McCollough

Address: 225 Walker Circle

Crestview Florida

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kathy McCollough

Address: 225 Walker Circle

Crestview Florida 32539

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

1 Jan 2012

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

1 Jan 2012

Date