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☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Christy Duh **GAVE**

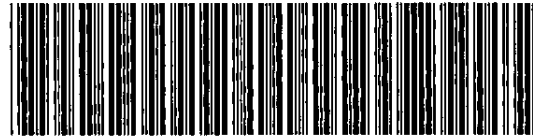
AUTHORIZATION BY PHONE TO

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DATE

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COVER LETTER

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

SUBJECT: Jax Reef and Marine Club, 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: Jax Reef and Marine Club, Inc.
Name (Printed or typed)

3709 San Pablo Rd S Apt 401
Address

Jacksonville, Florida 32224
City, State & Zip

937-508-5797
Telephone number

Administrator@jaxreef.org
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: Jax Reef and Marine Club, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
3709 San Pablo Rd S
Apt 401
Jacksonville, Florida 32224

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Mailing address, if different is:
12 APR 24 PM 4:08

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This club is dedicated to the growth of the saltwater aquarium hobby, and the conservation and preservation of our natural reefs. We are here to help educate and guide each other with the processes necessary to maintain a saltwater aquarium.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:
see attached articles Bylaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Willbur M Duhl, President/Administrator
Address: 3709 San Pablo Rd S
Apt 401
Jacksonville, Florida 32224

Name and Title: Brian S Babcock, Vice-President/Administrator
Address: 6414 Ringneck Dr
Dayton, Ohio 45424

Name and Title: Christy L Duhl, Treasurer/Administrator
Address: 3709 San Pablo Rd S
Apt 401
Jacksonville, Florida 32224

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: Christy L Duhl
Address: 3709 San Pablo Rd S
Apt 401
Jacksonville, Florida 32224

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Christy L Duhl
Address: 3709 San Pablo Rd S
Apt 401
Jacksonville, Florida 32224

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

Christy Duhl

Required Signature of Registered Agent

4/19/12
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.

Christy Duhl

Required Signature of Incorporator

4/19/12
Date