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| (Re                       | questor's Name)   |           |
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|                           |                   |           |
| (City                     | y/State/Zip/Phone | e #)      |
| PICK-UP                   | ☐ WAIT            | MAIL      |
|                           |                   |           |
| (Bu                       | siness Entity Nam | ne)       |
| (5)                       |                   |           |
| (D6                       | cument Number)    |           |
| Certified Copies          | Certificates      | of Status |
|                           |                   |           |
| Special Instructions to I | Filing Officer:   |           |
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Office Use Only



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## **COVER LETTER**

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

SUBJECT: Impact of Orlando Drum and Bugle Corps, Incorporated (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

| Enclosed is an original a | and one (1) copy of the Art                | icles of Incorporation and          | d a check for:                                 |
|---------------------------|--|-------------------------------------|--|
| \$70.00<br>Filing Fee     | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Co & Certificate |
|                           |  | ADDITIONAL C                        | OPY REQUIRE                                    |
|                           |  |                                     |  |
| FROM:                     |  | rinted or typed)                    | <del></del>                                    |
|                           | 616 Heather Sto                            |                                     |  |
|                           | Merritt Island, F                          | Address 32953                       |  |
|                           |  | State & Zip                         | <del></del>                                    |
|                           | 321-459-1593                               | klenhone number                     | <del></del>                                    |
|                           | tomloshe@cfl.i                             |                                     |  |
|                           |  |                                     |  |

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

## ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

| ARTICLE I The name of the o  | NAME Impact of Orlando Dr   | rum & Bugle Co          | rps, Incorporated              |                      |
|--|---|-------------------------|--------------------------------|----------------------|
| ARTICLE II   | PRINCIPAL OFFICE  |                         |                                |                      |
| ARTICIO II   | Principal street address  |                         | Mailing address, if d          | ifferent is:         |
|  | 1236 Little Oak Circle  |                         |                                |                      |
|  | Titusville, Florida 32780   |                         |                                |                      |
| ARTICLE III  | PURPOSE   |                         |                                |                      |
|  | which the corporation is organized is:  |                         |                                |                      |
| To bring awa   | areness and appreciation of the drun  | n corps activity        | to the general public by       | y means of           |
| entertaining   | performances.   |                         |                                |                      |
| ARTICLE IV   | MANNER OF ELECTION The manner   | in which the director   | s are elected and appointed:   |                      |
|  | e elected at the annual meeting   |                         |                                |                      |
| ARTICLE V  | INITIAL OFFICERS AND/OR DIREC   | TORS                    |                                |                      |
|  | Title: Darrel/Wahlberg President  |                         | : Thomas Loshe                 | Treasurer            |
| Address:   | 1236 Little Oak Circle  | Address:                | 616 Heather Stone Drive        |                      |
|  | Titusville, Florida 32780   |                         | Merritt Island, FL 32953       |                      |
| Name and   | Title:Brian Johns Vice President  | Name and Title          | <b>:</b>                       |                      |
| Address:   | 1544 Yardlev Ct   |                         |                                |                      |
|  | Kissimmee, Fl 34744   |                         |                                |                      |
| Name and   | Title: David Borst Secretary  | Name and Title          | :                              |                      |
| Address:   | 2137 Laden Road   |                         |                                |                      |
|  | Melbourne, Fl 32935   |                         |                                |                      |
|  |   |                         |                                | N 500                |
| ARTICLE VI   | REGISTERED AGENT  |                         |                                | y:                   |
|  | lorida street address (P.O. Box NOT acceptable  | of the registered age   | entis:                         |                      |
| Name:  | Darrell Wahlberg  | y or the registered age | AL ID.                         | 1 97 29              |
| Address:   | 1236 Little Oak Circle  | <del></del>             |                                | <b>→</b> 32/#        |
|  | Titusville, Florida 32780   | <del></del>             |                                |                      |
|  |   |                         |                                |                      |
|  |   |                         |                                | <b></b>              |
| ARTICLE VII  | INCORPORATOR  |                         |                                | 50 温温                |
|  | ddress of the Incorporator is:  |                         |                                | <b>09</b>            |
| Name:  | Thomas Loshe  |                         |                                |                      |
| Address:   | 616 Heather Stone Drive   |                         |                                |                      |
| Merritt is   | Merritt Island, FL 32963  |                         |                                |                      |
| Having been na   | med as registered agent to accept service of pr   | ocess for the above :   | stated corporation at the plac | e designated in this |
|  | amiliar with and accept the appointment as regis  |                         |                                |                      |
| The state of the s | med Clabing   |                         | 05/01/2012                     |                      |
|  | Required Signature of Registered Agen   | 1                       | Date                           | -                    |
|  | uppent and affirm that the facts stated herein are<br>n of State constitutes a thirl degree felony as pro |                         |                                | uitted in a document |
| Departmen  |   |                         | ry =P                          |                      |
| S  | rumas FX  | -                       | 05/02/2012                     |                      |
|  | Required Signature of Incorporat  | tor                     | Date                           | e                    |