

N12000006260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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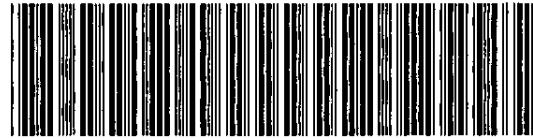
(Business Entity Name)

(Document Number)

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12 JUN 25 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FL 32399

T. Burch JUN 26 2012

COVER LETTER

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

SUBJECT: Committed Citizens of Flagler Estates 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: Mary A. Nelson
Name (Printed or typed)

4245 Cedar Ford Blvd
Address

Hastings, FL 32145
City, State & Zip

386-325-8618
Telephone number

ccfe.org32145@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: **Committed Citizens of Flagler Estates Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
4245 Cedar Ford Blvd
Hastings, FL
32145

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To benefit the social welfare of the citizens in the community known as Flagler Estates, in Saint Johns County, Florida, by consolidating the voice of the board of the corporation to deal with local, county, and state governing bodies.

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

Appointed, as provided for in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Allen Traugh President
Address: 10170 Allison St
Hastings, FL
32145

Name and Title: Mary Nelson Secretary
Address: 4245 Cedar Ford Blvd
Hastings, FL
32145

Name and Title: William Reinhardt Vice President
Address: 4215 Susan St
Hastings, FL
32145

Name and Title: Joann Reinhardt Treasurer
Address: 4215 Susan St
Hastings, FL
32145

Name and Title: Judith Traugh Director
Address: 10170 Allison St
Hastings, FL
32145

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: Mary A. Nelson
Address: 4245 Cedar Ford Blvd
Hastings, FL
32145

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Mary A. Nelson
Address: 4245 Cedar Ford Blvd
Hastings, FL
32145

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

Mary A. Nelson
Required Signature of Registered Agent

June 21, 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.

Mary A. Nelson
Required Signature of Incorporator

June 21, 2012

Date

FILED
12 JUN 25 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FL 32307