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COVER LETTER

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

SUBJECT: Rotar	y Club of Sugarmill \		
Enclosed is an origina \$70.00 Filing Fee	(PROPOSED CORPORATION OF THE Article of Status		
	·	ADDITIONAL C	OPY REQUIRED
FROM	: Julian A. Weingard	ten rinted or typed)	<u> </u>
	23 Pine Drive	Address	_
	Homosassa, Fl 3	34446 State & Zip	_
	352-382-55591	,	

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

23 Pine Daytime Telephone number

jweingarten@tamapabay.rr.comRotary Club of E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)
Rotary Club of Sugarmill Woods-Citrus County, Florida, Inc.

Principal street address Principal street address ARTICLE III PURPOSE The purpose for which the corporation is organized is: To encourage and foster the ideal of service as a basis of worthy enterprise and, in particular, to encourage and foster: First. The development of acquair opportunity for service; Second. High ethical standards in business and professions; the recognition of the worthiness of all useful occupations; and the d Rotarian's occupation as an opportunity to serve society; Third. The application of the ideal of service in each Rotarian's personal, business, and communifourth. The advancement of international understanding, goodwill, and peace through a world fellowship of business and professional persons unitled in the service. ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Elected annually. ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Linda Proffer, President Name and Title: Julian A. Weingarten, Treasure Address: 1014 SE 4th Avenue Address: 23 Pine Drive Homosassa, Fl 34446	ARTICLE I The name of the c	NAME Rotary Club of Sugarorporation shall be:	rmill Woods-Citrus County, Flo	rida, Inc.
Principal street address 23 Pine Drive Homosassa, Fl. 34446		•		
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Required Signature of Registered Agent Date Date Date Date Ubmit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in	rtificate, I am fo	umiliar with and accept the appointment as regi	tered agent and agree to act in this capac	ity
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ibmit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	~/	Required Signature of Registered Ager	. 1	Date
the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	ubmit this doci	Julian A Weing a ument and affirm that the facts stated herein ar	true. I am aware that any false informa	ution submitted in a documen
	the Department	t of State constitutes a third degree felony as pro	oided for in s.817.155, F.S.	
Shelly Lavis Heir Carler July 5, 2012	S/h	My Davis Wen	farler July!	
Required Signature of Incorporator Date Six Ellan Day 15 Weing arten Date	_		W. aarten	Date