

N120000009149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

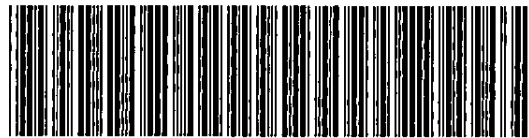
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRP
9/25/12

COVER LETTER

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

SUBJECT: Palm Harbor/ Oldsmar Professional Firefighters, Local 2980, 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: Jason Schwabe
Name (Printed or typed)

PO Box 565
Address

Palm Harbor, Florida 34682
City, State & Zip

(888) 712-2980
250 West Park Road Telephone number

jschwabe@local2980.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: **Palm Harbor/ Oldsmar Professional Firefighters, Local 2980, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
250 West Lake Road
Palm Harbor, Florida 34684

Mailing address, if different is:
PO Box 565
Palm Harbor, Florida 34682

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Not for profit labor organization representing the professional firefighters of Palm Harbor Special Fire Control and Rescue District and the professional firefighters of The City of Oldsmar.

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

Elected by a majority of the membership in a manner provided for per the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rodney malpass, President
Address: PO Box 565
Palm Harbor, Florida 34682

Name and Title: Doug Zimmerman, Secretary/ treasurer
Address: PO Box 565
Palm Harbor, Florida 34682

Name and Title: Jason Schwabe, District Vice President, Oldsmar
Address: PO Box 565
Palm Harbor, Florida 34682

Name and Title: Hunter Brown, District Vice President, Palm Harbor
Address: PO Box 565
Palm Harbor, Florida 34682

Name and Title: N/A
Address: _____

Name and Title: N/A
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

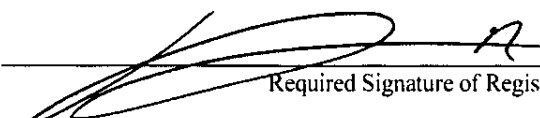
Name: Rodney malpass
Address: 250 West Lake Road
Palm Harbor, Florida 34684

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

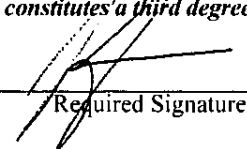
Name: Jason Schwabe
Address: PO Box 565
Palm Harbor, Florida 34682

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

20 SEPT 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.


Required Signature of Incorporator

09/20/12
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA