## 1089000061

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



800240565508

10/12/12--01014--011 \*\*70.00

12 OCT 12 PM 4: 25

tr 10/15/12

## **COVER LETTER**

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

SUBJECT: Deltona Art Club, Luc.						
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)						
Enclosed is an original a	and one (1) copy of the Artic	les of Incorporation and	l a check for:	<del></del>		
\$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 CO	OPY REQUIRED			
FROM: 505an Furrie Name (Printed or typed)						
521 Salerno Dr. Address						
Deltona FL 32725						
401 - 571 61123						
Daytime Telephone number  Susanfuricartist Pyahoo.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)

The name of the corp	pration shall be: Deltona Art Club, I	NC, SEGRETARY OF STATE DIVISION OF CURPOR ATTONS		
	RINCIPAL OFFICE	and the state of t		
	Principal <u>street</u> address 2540 RV5K Ct,	Mailin Lath Gass it different is 26		
	Deltana EL			
	31739			
•	PURPOSE			
The purpose for which	ch the corporation is organized is:	11/2 tu		
to end	courage art in the commu			
ARTICLE IV	MANNER OF ELECTION The manner in which the dire	ctors are elected and appointed:		
	stated in by-laws			
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS	Pt.1		
	: William Evans / President Name and 1 2540 Rusk Ct. Address:	itte:		
Addiess.	Deltona, FL			
	32738			
Name and Title	:Susan Furric/Tresurer Name and	Fitle:		
Address:	521 Salerno Dr. Address:			
	Deltona, FL			
	32725			
Name and Title	: Shavon Hrezo/Secretary Name and	Citle:		
Address:	1824 Kingway Drive N. Address:			
	Deltona, FL			
	<u>5#155</u>			
	EGISTERED AGENT			
The name and Florid Name:	la street address (P.O. Box NOT acceptable) of the registered	agent is:		
Address:	2540 Rusk Ct			
	Deltona FL			
	32738			
ARTICLE VII	NCORPORATOR			
	ss of the Incorporator is:			
Name:	Susan Furviel 521 Falerno Dr.			
Address:	Deltona FC			
	32725			
certificate, I am fami	as registered agent to accept service of process for the aboliar with and accept the appointment as registered agent and a	agree to act in this capacity		
_Will	ian W. Cuano	10/8/12		
	Required Signature of Registered Agent	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.				
5,	Required Signature of Incorporator	10/8/12		
	Required Signature of Incorporator	Date		