

N/2000010083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

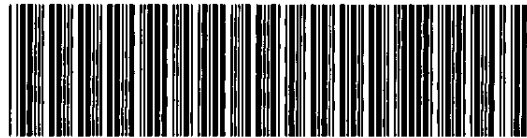
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000238368440

08/13/12--01047--011 \*\*87.50

RECEIVED  
TALLAHASSEE, FLORIDA

12 OCT 23 PM 12:59

2012 OCT 23

W12-42751

K 10/24/12



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 5, 2012

ROBYN TRACY  
4629 BARBADOS LOOP  
CLERMONT, FL 34711

\*\*\* 2ND REJECTION \*\*\*

SUBJECT: RIDING NIGHTINGALES, INC.  
Ref. Number: W12000042751

We have received your document for RIDING NIGHTINGALES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please TYPE or PRINT the information on the application. Some of the cursive writing is illegible.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 612A00021089



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
12 SEP -4 AM 10:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

August 15, 2012

ROBYN ~~TRACY~~ *TRACY*  
4629 BARBADOS LOOP  
CLERMONT, FL 34711

SUBJECT: RIDING NIGHTINGALES  
Ref. Number: W12000042751

We have received your document for RIDING NIGHTINGALES and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Section 617.0803, Florida Statutes, requires that the board of directors never have fewer than three directors.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 612A00021089

## COVER LETTER

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

SUBJECT: Riding Nightingales, 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: Riding Nightingales  
Name (Printed or typed)

4624 Barbados Loop  
Address

Clermont FL 34711  
City, State & Zip

352-978-7093  
Daytime Telephone number

robyn@RidingNightingales.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: Riding Nightingales, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

4629 BARBADOS Loop  
Clermont FL 34711

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: A motorcycle riding club especially for Nurses to provide support for each other, enjoy riding motorcycles, and support the community through charity work.

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

General Election by shareholders

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Robyn Tracy

Address: 4629 BARBADOS Loop  
Clermont FL 34711

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Kenneth Means

Address: 4629 BARBADOS Loop  
Clermont FL 34711

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Tracy Vaughn

Address: 729 South Roma Way  
Kissimmee FL 34741

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: Robyn Tracy

Address: 4629 BARBADOS Loop  
Clermont FL 34711

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Robyn Tracy

Address: 4629 BARBADOS Loop  
Clermont FL 34711

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

Robyn Tracy

Required Signature of Registered Agent

10/6/12

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.

Robyn Tracy

Required Signature of Incorporator

10/6/12

Date