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SECRETARY OF STATE
TALLAHASSEE, FL 32399

T. Burch NOV 26 2012

COVER LETTER

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

SUBJECT: Jacksonville Chapter Construction Specifications Institute, 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: Remberto J Leiseca
Name (Printed or typed)

PO Box 17197
Address

Fernandina Beach, FL 32035-3137
City, State & Zip

904-261-3327
Daytime Telephone number

rjlassoc@earthlink.net
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: Jacksonville Chapter Construction Specifications Institute, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1050 Bella Vista Blvd., Apt 136
St. Augustine, FL 32084-1291

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Educational and professional organization for continuing education of members and community on construction related matters and promotion thereof

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

Officers and directors shall be elected to terms of one year at the annual meeting as per member adoption

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: President, Katharine Elizabeth Mizia, CSI, CDT
Address: 4607 Glendas Meadow Dr
Jacksonville, FL 32210-0419

Name and Title: Director, Darryl Rodgers, CSI
Address: Rodgers Architects, LLC
10175 Fortune Pkwy Unit 502
Jacksonville, FL 32256-6751

Name and Title: Secretary, Frank Wilson Bozzarelli, CSI, BS
Address: 1050 Bella Vista Blvd Apt 136
Saint Augustine, FL 32084-1291

Name and Title: Director, Joyce B. West, CSI, ASID
Address: ContractSource
1604 Lakewood Rd
Jacksonville, FL 32207-6122

Name and Title: Treasurer, Lee M. Palmer, CSI
Address: 1257 Lake Parke Dr
Jacksonville, FL 32259-3036

Name and Title: Director, Remberto J. Leiseca, CSI, CCPR
Address: RJI Associates, Inc.
PO Box 17197
Fernandina Beach, FL 32035-3137

ARTICLE VI REGISTERED AGENT

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

Name: Frank Wilson Bozzarelli, CSI, BS
Address: 1050 Bella Vista Blvd Apt 136
Saint Augustine, FL 32084-1291

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Remberto J Leiseca, CSI, CCPR
Address: PO Box 17197
Fernandina Beach, FL 32035-3137

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

Frank Wilson Bozzarelli
Required Signature of Registered Agent

11/5/12
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.

Remberto J Leiseca
Required Signature of Incorporator

11/19/12
Date

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SECRETARY OF STATE
ALLAHBADI