

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

Office Use Only



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4/26 1/20 W13-21236 90

COVER LETTER

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

SUBJECT: North Florida Beagle Club, 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

■ \$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

James G. Lane

Name (Printed or typed)

4080 Hidden Acres Road

Address

Middleburg, Florida 32068

City, State & Zip

904-730-5004 Ext. 1

Daytime Telephone number

jgl_eaglecreekknls@att.net

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 11, 2013

JAMES G. LANE 4080 HIDDEN ACRES RD MIDDLEBURG, FL 32068

SUBJECT: NORTH FLORIDA BEAGLE CLUB, INC.

Ref. Number: W13000021230

We have received your document for NORTH FLORIDA BEAGLE CLUB, 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):

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

Please return 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.

Jessica A Fason Regulatory Specialist II

Letter Number: 113A00008632

RECEIVED

13 APR 25 PM 1: 14

INTSIDE OF CORPORATION

www.sunbiz.org

ARTICLES: OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

The name of the	e corporation shall be: North Florida	Beagle C	Slub, Inc.	·····	
ARTICLE II	PRINCIPAL OFFICE				
	Principal street address:		Mailing address, if different is:		
Jam	es G. Lane				
408	30 Hidden Acres Road				
Mic	ldleburg, Florida, 32068				
ARTICLE III The purpose fo	PURPOSE r which the corporation is organized is:	acess a l	Bank Account		
	Flumpose Of THE R			War IF	
and its	Regismon By MB	, Amede	n Report CMB		
	OUT BOOM IN BXSISTEN		_		
	THE C. THE P. D.	~ 771	Power The Band	-	
yeary	AMERICAN Kennel C	$\mathcal{O}_{1} \wedge \mathcal{O}_{2}$	110 DE DEAGN		
	_	MB IN	gis/end pound Dred	· -	
	Aunt	 	Clu	h Votes	
ARTICLE IV	MANNER OF ELECTION The ma	anner in which the	e directors are elected and appointed: Clu	D VO(C3	
yearly mee	eungs				
ARTICLE V	INITIAL OFFICERS AND/OR DI	RECTORS			
Name and Title	James G. Lane/President	Name and Title	Clay Mews/Vice President		
Address	4080 Hidden Acres Road		Po Box 358		
	Middleburg, Florida 32068		Seville, Florida 32190_		
			2000 11 (17) 17 (17)	13 /	
Name and Title	Joy Lane/Sec./Trea.	Nome and Title		APR T	
	4080 Hidden Acres Road		·	25	
Address	Middleburg, Florida 32068	Address:	and the state of t		
	- Industry, Francisco			i: 07	
Name and Title	»:	Name and Title	::		
Address		Address:			

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Name and Title:	·	Name and Title:		
Address				
•				
	•			
Name and Title		Name and Titles		
Name and Title:_				
Address		Address:		
		 		
The name and Fl	REGISTERED AGENT prida street address (P.O. Box NOT accept	otable) of the registered agent is	S	
Name:	James G. Lane	, ,		
Address:	4080 Hidden Acres Ro	ad		
11461055.	Middleburg, Florida 320	068	는 본숙	ದ
			는 10년 1년	APR TH
ARTICLE VII	INCORPORATOR		道: 1 (2) (7)	25
The name and ad	dress of the Incorporator is:			4** 4***
Name:	James G. Lane		7.3	
Address:	4080 Hidden Acres Ro	pad	51. 22.	AHII: 07
	Middleburg, Florida 32	068	∑ [™]	7
certificate, I am f	ned as registered agent to accept service of amiliar with and accept the appointment at the Arnes Required Signature of Registered ament and affirm that the facts stated here	s registered agent and agree to 2	ouct in this capacity 04/04/201 Date	3
	Tof State constitutes a third degree felony	as provided for in s.817.155, F	i.S.	
	JAmes Required Signature of Incorp	G LANC	04/04/201	3
	Required Signature of Incorp	porator	Date	