

N13000006384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

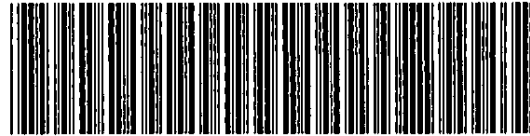
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100249470291

07/12/13--01022--003 **78.75

FILED
13 JUL 12 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7:00pm JUL 18 2013

COVER LETTER

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

SUBJECT: Lill Bill B.S.A. Classic, 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: R. Alex Wesley
Name (Printed or typed)

8412 SW 5th Place
Address

Gainesville, FL 32607
City, State & Zip

352-339-3644
Daytime Telephone number

AM Construction Works@hotmail.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: Lill Bill B.S.A. Classic, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

5341 SW 91st Terr.

Gainesville, FL. 32608

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To collect money for the
research of multiple Sclerosis, Also to raise funds
for those in need of treatment from M.S.

FILED
13 JUL 12 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Voting System between officers

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Matt Thomas

Address

President

5341 SW 91st Terr.
Gainesville, FL. 32608

Name and Title: R. Alex Wesly

Address:

Vice President
8412 SW 5th Place
Gainesville, FL. 32607

Name and Title: Eric Davis

Address

Manager
5214 SW 94th St.
Gainesville, FL. 32608

Name and Title: Patrick Currie

Address:

Manager
6811 NW 40th Drive
Gainesville, FL. 32653

Name and Title:

Address

Name and Title:

Address:

• Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
13 JUL 12 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: R. Alex Wesley

Address: 8412 SW 5th Place
Gainesville, FL 32607

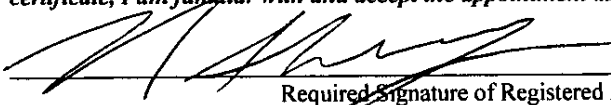
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: R. Alex Wesley

Address: 8412 SW 5th Place
Gainesville, FL 32607

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

6/19/13

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

6/19/13

Date