## N13000007656

(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:		
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)	
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status		
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)	
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status		
PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)	
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Special Instructions to Filing Officer:		
Special instructions to Filing Officer:		
	Special Instructions to Filing Officer:	
-W13-43198	-W13-43198	

Office Use Only



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## COVER LETTER

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

SUBJECT: E.S. E. C.B.H.S. BOOSTER CLUBING.
(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

\$78.75 Filing Fee & Certified Copy **87.50** 

Filing Fee & Certificate of Filing Fee, Certified Copy

Status

& Certificate

ADDITIONAL COPY REQUIRED

FROM: ALISON F. JOHNSTON
Name (Printed or typed)

1860 N PINE ISLAND RD. #101

PLANTATION FL 33322
City, State & Zip

Alison\_Johnstone Bell South, net E-mail address: (to be used for future annual report notification)

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



August 6, 2013

ALISON F. JOHNSON 1860 N PINE ISLAND RD. #101 PLANTATION, FL 33322

SUBJECT: E.S.E. C.B.H.S. BOOSTER CLUB, INC.

Ref. Number: W13000043798

We have received your document for E.S.E. C.B.H.S. BOOSTER 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):

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 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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 913A00018794

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

The name of the corporation shall be: £.5. E. C. B. H. S. E	BOOSTER CLUB, INC. DIVISION OF CORPOR
ARTICLE II PRINCIPAL OFFICE	2019 AUG 19 AM I
Principal street address:	Mailing address, if different is:
1860 N. PINE ISLAND RD. #101	
PLANTATION, FL. 33322	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is: TO 50 PP	PORT CYPRESS BAY HIGH
OCHOOL'S EXCEPTIONAL STUDENT ED	UCATION P.A.S.S. PROGRAMS.
THESE-PROGRAMS-ARE FOR-SPECIAL NE	
VOCATIONAL AND INDEPENDENT SKILL	S' TRAINING THESE COMMUNITY
BASED PROGRAMS REGULTE ASSISTAN	CE WITH FUND RAISING, ADDOCACY
JOB/VOCATIONAL SITES, PLACEMENTS, A	,
SOCIAL ACTIVITIES; AND BUSINESS Z	
ARTICLE IV MANNER OF ELECTION The manner in whic	
OFFICERS VOLUNTZERED FROM A MEETING	
FORM THE LLUB, OTHER OFFICERS WILL ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	. BE VOLUNTEEUS FROM JUBSEQUE MEETINGS, VOLUNTEERS WILL NOT
	BROWARD COUNTY PUBLIC 50100LS
Name and Title: ALI SON F JOHNSTON Name and	Title A-D-1-From OFFICERS/ WILL BE
PRESIDENT	A PROINTED FROM VOLUNTEERS,
Address 1860 N PINE ISLAND RD. Address:	THE CWB. WILL BE DEFERMINED
<u> </u>	THE CLUB BYLINUS. AND WILL BE
PLANMIUN FL 33322	APPOINTED AND ELECTED PUSITION IN ACCORDANCE TO THE CLUB
TEMOTH TOO PL 99922	BYLAWS, DIRECTORS NOTED HAVE
Name and Title: KRISTI MESSER Name and	
VICE-PRESIDENT	APPOINTED POSITIONS ( PRESIDENT,
Address 1139 CHENILLE CIRCLAddress:	VICE PRESIDENT TIRENSUNER)
WESTON FL 33327	
Name and Title: <u>STEPHEN F. JOHNSTON</u> Name and Treasurer	Title:
Address 3671 SANSIMEON CIRCLARdress:	
WESTON, FL 33331	

Name and Title;	<u> </u>	Name and Title:	SECRETAR	EU FOR CTAN			
Address		Address:	2812 ALIG	EU FOF STATE ORPORATION			
			2813 AUG 19	AM 11:,28			
Name and Title:		Name and Title:		<del></del>			
Address		Address:		_			
<u>. ·</u>		<del></del>	·	_			
		· ·		<del></del>			
ć		·					
	REGISTERED AGENT	والمناو فيجوا والاوراد	. <u>-</u>				
The name and Flor	ida street address (P.O. Box NOT acce	ptable) of the registered agent i	S:				
Name:	ALISON FJOHNSTO	N		•			
Address:	1860 N PINEISLAND	RD. #101					
	PLANMMON FL 33:	322					
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:							
Name:	ALISON F JOHNSTON	)	1				
Address:	1860 N PINE ISLANDA						
	PLNNMMON, 12 335	322					
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							
Min	J. Arm		7-26-1 Date	3			
ALISC	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.							
_ Ais_	Required Signature of Incor	<u> </u>	7-26-1 Date	3			
1430n	Required Signature of Incom	porator	Date	2			

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