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SECRETARY OF STATE
DIVISION OF CORPORATIONS

13 OCT 23 PH 12: 05

Ps, olucio

## **COVER LETTER**

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

SUBJECT: Clean Waterway Society 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: Shannon Woods

Name (Printed or typed)

1212 Ribbon Rd

Address

St. Johns, FL 32259

City, State & Zip

904-814-3002

Daytime Telephone number

srduncan82@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 The name	EI NAME of the corporation shall be: Clean Water	way Society Inc.	FIL SECRETAR DIVISION OF C	.ED Y OF STATE ORPORATIONS
ARTICL			13 OCT 23	PH 12: 05
<i>,</i> –	Principal <u>street</u> address: 1212 Ribbon Rd	Mailing ad	dress, if different is:	
-	St. Johns, Fl 32259			
	se for which the corporation is organized is: to artnerships that improve water			
rehab	ilitate and protect our natural	resources.		
	· · · · · · · · · · · · · · · · · · ·	<del></del>	- HL	
ARTICL	E IV MANNER OF ELECTION The m	anner in which the directors are elec	ted and appointed: Were	e chosen
by the	Board of Directors			
ARTICL	E V INITIAL OFFICERS AND/OR DI	RECTORS		
Name and	Title: Eric Bersinger/President	Name and Title:		
Address	7830 Timberlin Park Blvd			
Audiess	Jacksonville, FI 32256		<del></del>	
	Title: Josh Woods/Secretary			
Name and Titl Address	1212 Ribbon Rd	Name and Title:		
	St. Johns, FL 32259	Address:		
Name and	Title: Shannon Woods/ Treasurer	Name and Title:		
Address	1212 Ribbon Rd	Address:		
	St. Johns, Fl 32259	****		

•			
•	<i>,</i> ,		FILED SECRETARY OF STATE
Name and Title:_		Name and Title:	DIVISION OF CORPORATIONS
Address		Address:	13 OCT 23 PM 12: 05
Address		Address:	
ARTICLE VI The name and Flo Name: Address:	REGISTERED AGENT Orida street address (P.O. Box NOT access Shannon Woods 1212 Ribbon Rd St. Johns, FL 32259	eptable) of the registered age	nt is:
ARTICLE VII The name and ad Name: Address:	INCORPORATOR  dress of the Incorporator is:  Eric Bersinger  7830 Timberlin Park E  Jacksonville, FL 3225		
Having been nan certificate, I am fo	ned as registered agent to accept service amiliar with and accept the appointment of Required Signature of Registered	as registered agent and agre	tated corporation at the place designated in this to act in this capacity  10/8/2013  Date
	ment and affirm that the facts stated here of State constitutes a third degree felony Required Signature of Income	as provided for in s.817.15: -	t any false information submitted in a document 5, F.S.  10/8/2013 Date