

N/3000/0025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

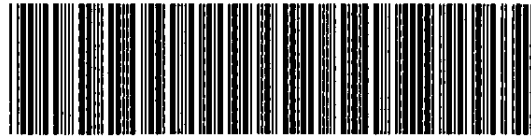
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Certificates of Status

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 NOV -4 AM 9:00

Handwritten signature and date 11/6/13

COVER LETTER

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

SUBJECT: Southwest Florida Public Risk Management Association Chapter, 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: Steve Olmstead
Name (Printed or typed)

1660 Ringling Blvd., 4th Floor
Address

Sarasota, FL 34236
City, State & Zip

941-232-0744
Daytime Telephone number

solmstead@scgov.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: Southwest Florida Public Risk Management Association Chapter, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address:
City of Cape Coral

1015 Cultural Park Blvd.

Cape Coral, FL 3390

Mailing address, if different is:

SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 NOV - 4 AM 9:00

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To increase the proficiency of management of risk, insurance and benefits in government and other public entities through education and networking, to support the mission and goals of the Public Risk Management Association and to act in any other manner that will further the best interests of governments (Federal, state, county, municipal, tribal), government agencies, intergovernmental risk pools, schools and other special districts in their risk management activities.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: By majority vote annually as stated in the By-laws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael K. Quigley - President

Name and Title: _____

Address

City of Cape Coral

Address: _____

1015 Cultural Park Blvd.

Cape Coral, FL 3390

Name and Title: Steven H. Olmstead, Jr. - Vice President

Name and Title: _____

Address

Sarasota County Government

Address: _____

1660 Ringling Blvd., 4th Floor

Sarasota, FL 34236

Name and Title: Renee Hudson - Secretary/Treasurer

Name and Title: _____

Address

City of Bradenton

Address: _____

101 Old Main Street

Bradenton, FL 34205

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Steven H. Olmstead, Jr.

Address: 1660 Ringling Blvd., 4th Floor

Sarasota, FL 34236

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Michael K. Quigley

Address: 1015 Cultural Park Blvd.

Cape Coral, FL 3390

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

Steven H. Olmstead

Required Signature of Registered Agent

10-31-13

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.

Michael K. Quigley
Required Signature of Incorporator
Michael K. Quigley

10-11-2013

Date