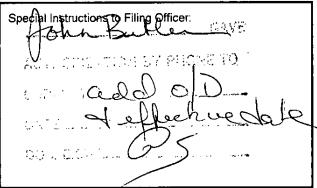


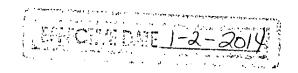
(Requestor's Name)							
(Address)							
(Address)							
(100.000)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							



Office Use Only



200253954902



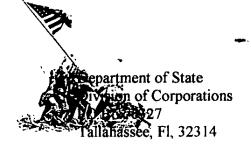
12/05/13--01015--012 **78.75

FILED STATE
SECRETARY OF STATE
SEVISION OF CORPORATIONS
13 DEC -5 AHII: 19

PS 12/6/13

John A. Butler

President



5th Marine Division Association

65th Reunion, Tampa Florida September 8-13, 2013



Dear Sir:

Please find enclosed my personal check in the amount of 78.75 (filing fee & certificate of status) for the 5th Marine Division Association, Inc., a non profit 501 4C organization, formed in 1952 for the purpose of providing reunions & news letters for surviving members of the 5th Marine Division, who fought the battle of Iwo Jima in WW2.

Among other things, The Association over the years has provided scholarships for the sons & daughters of both the lost & surviving Division members. In 2010 the Association installed a bronze memorial honoring the division at the US Marine Corps Heritage Center in Quantico Virginia.

This Association has never been registered in the state of Florida.

I am John Butler, son of a heroic Marine battalion commander, who was killed in action during the battle. I have been an Associate member of the Association since 1990, when I attended their reunion in New Orleans, with my widowed mother.

I have been asked by the elderly current Board & Trustees of the Association to host the Association's 2014 reunion in Tampa scheduled for September 8th -13th. I have also accepted appointment as President for the Association and the 2014 reunion. A new President may be appointed at the 2014 business meeting, usually held on the last day of the reunion.

In any case I need to open an account for the Association at my local Wells Fargo branch Bank. This will allow me to fund the services I will need for the planned activities, and also to deposit Registration fees from attending members.

I hope you can expedite the approval of my application and issue a certificate that I can present to the bank. I filled out the paper work as best as I could from the instructions received. Please fax the approved certificate directly to the bank at 813 276-6017.

I trust that all is in good order, and that I will be hearing from you as soon as possible.

Respectfully,

John Butler

President 5th Marine Division Association

CC: Wells Fargo Bank

5880 E Fowler, Tampa Fl 33617

COVER LETTER

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

SUBJECT: _	5 Ch MARINE DIVISION HISSOCIATION, Inc
_	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed is ar	n original and one (1) cony of the Articles of Incorporation and a check for:

\$70.00 . \$78.75 \$78.75 □ \$87.50 Filing Fee Filing Fee & Filing Fee Filing Fee. & Certified Copy Certificate of Certified Copy Status & Certificate ADDITIONAL COPY REQUIRED

> Name (Printed or typed) 813 985065 7
>
> Daytime Telephone number

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:	Th Marine Division Association, Inc
ARTICLE II PRINCIPAL OFFICE	• •
Principal street address:	Mailing address, if different is:
FL 3361	The second of th
ARTICLE III PURPOSE	anized is: To province Annual Reunion
	embers of the 5th Merine DIVISION
Association, zn	erganz Stron Formed in 1952
_	The 5th Marine Duision in WWZ
who Fought The bo	Itle of Iwo Jimp and planted The
	ELBACKE, Members of This Association
26Th, 27Th, + 13th	Persons of The vetering and members of The Region To Meeines who served in Victrom The manner in which the directors are elected and appointed:
i/oTed on by Tonecal ma	nbeksho- Bericking = ppointed For The Reunio
ARTICLE V INITIAL OFFICERS	AND/OR DIRECTORS
Name and Title: John Butle!	
Address // F7/ Rain	ree Dai Medress:
TEMPLE TEXA	ACE, FL 33617
	OF CONTRACT
	Name and Title:
Address	Address:
Name and Title:	Name and Title:
Address	Address:

Name and Title:		Nama and Title			
Address					
<u>-</u>					
ARTICLE VI The name and Flo	REGISTERED AGENT orida street address (P.O. Box NOT acce	ptable) of the regis	tered agent is:		13 VISE
Name:	Jihn ABJTGA				品品
Address:	11871 ROMEREC	Prive			5 82
	11571 Rantrec Tample Tenrae	e, FL	33617	ı	OF STATE OF STATIONS RPORATIONS
ARTICLE VII The name and ad-	INCORPORATOR dress of the Incorporator is:				20 20
Name:	John A Baller				
Address:	11871 Reintre	Driv	e		
Having been nam certificate, I am fa	Temple Terrec	-,FL	33617	on for the place of	lesignated in this
— <u> </u>	Required Signature of Registered			1-20- Date	2013
I submit this docu to the Department	ment and affirm that the facts stated here of State constitutes a third degree felony	in are true. I am a as provided for in	iware that any false info s.817.155, F.S.	ormation submitte	ed in Adocument
	Required Signature of Incor	porator		Date	<u>v-2013</u>