

COVER LETTER

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

SUBJECT: DOG LOVERS CLUB @ KINGS POINT, 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: Nancy McGinnis
Name (Printed or typed)

202 Bedford St, 53
Address

Sun City Center, FL 33573
City, State & Zip

501-256-3064
Daytime Telephone number

nnmcginnis@yahoo.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)

RECEIVED
14 JAN -8 PM 3:56
MARTIN LUTHER KING JR. LIBRARY

ARTICLE I NAME

The name of the corporation shall be: Dog Lovers Club @ Kings Point, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
202 Bedford St, #53

Mailing address, if different is:

Sun City Center, FL 33573

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide an environment for dog owners to become educated on the care and training of dogs.

ARTICLE IV MANNER OF ELECTION

Shall be elected by the membership of the organization
The manner in which the directors are elected and appointed: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nancy McGinnis, President/Director

Address: 202 Bedford St, #53
Sun City Center, FL 33573

Name and Title: Charlotte Galambos, Vice-President/Director

Address: 1906 Canterbury Lane, L5
Sun City Center, FL 33573

Name and Title: Cheryl Goodwin, Secretary/Director

Address: 839 Manchester Woods Dr
Sun City Center, FL 33573

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: Nancy McGinnis

Address: 202 Bedford St, 53

Sun City Center, FL 33573

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nancy McGinnis

Address: 202 Bedford St. 53

Sun City Center, FL 33573

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

Nancy McGinnis
Required Signature of Registered Agent

1-3-2014
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.

Nancy McGinnis
Required Signature of Incorporator

1-3-2014
Date