## N14000001976

(Requestor's Name)			
(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:			





300256035383

02/26/14--01012--007 \*\*87.50

SECRETARY OF STATE.



## **COVER LETTER**

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

Alexande	er Keith Memorial Pipe Band Inc.					
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )						
Enclosed is an original a	and one (1) copy of the Artic	les of Incorporation and	a check for:			
\$70.00	□ \$78.75	<b>□\$78.7</b> 5	\$87.50			
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,			
C	Certificate of	& Certified Copy	_			
	Status		& Certificate			
	,	ADDITIONAL CO	PY REQUIRED			
	Kelly Martin Kennedy					
FROM:	•	_				
	Name (Prin					
	2954 Maple Court					
	Ad	dress	-			
	Dunedin, FL 34698					
	-					
	Daytime Tele	ephone number	-			

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

E-mail address: (to be used for future annual report notification)

kellyken@tampabay.rr.com

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

ARTICLE I The name of the	<b>NAME</b> ne corporation shall be:	Alexander Keith	Memorial Pip	e Band, Inc.	RECREMENT OF SMILE
<u>ARTICLE II</u>	PRINCIPAL OF	FICE		. 201	4 FEB 26 RH 12: 59
295	Principal <u>street</u> add 4 Maple Court	ress:		Mailing address, if differe	ent is:
Dur	nedin, FL 34698				
ARTICLE II	· · · · · · · · · · · · · · · · · · ·	Ale	exander Keith	Memorial Pipe Band Inc	c. is organized
	or which the corporation or which the corporation or which the corporated exclusion.		ional purpose	s within the meaning of	Scetion 501(c)(3)
of the Inter	rnal Revenue Cod	de of 1986, or the	e correspondi	ng section of any future	Federal tax code.
Alexander	Keith Memorial F	Pipe Band Inc.'s p	ourpose is to	educate, coordinate and	support musicians
practicing	the traditional folk	music of the gre	eat highland b	agpipe of Scotland.	
<del></del>	**************************************				
ARTICLE IV	MANNER OF I			directors are elected and appoint	ted:
	- Unit Dylaws of A			Dand Inc.	
ARTICLE 1	V INITIAL OFF	ICERS AND/OR DI	RECTORS		
	Kelly Kennedy,			Jennifer Druda, VP	
Name and Titl	e: 2954 Maple Co	urt	Name and Title:	1917 Whitney Way	<del></del>
Address	Dunedin, FL 34	698	Address:	Clearwater, FL 33760	
Address	Erin Kaminsky,	Secretary	Name and Title Address:	Kiley Kaiser, Treasurer	
	2844 Homewoo	d Street		1118 New York Avenue	
	Clearwater, FL	33759	-	Dunedin, FL 34698	
Name and Titl	e:		Name and Title		<del></del>
Address			_ Address:		
	<del></del>		-		

Name and Title:_		Name and Title:	<u> </u>	
Address	, , ,	Address:	STORETARY OF STATE STVISION OF CORPORATION	
-			2014 FEB 26 PM 12: 59	
Name and Title		Name and Title:		
Address	<del> </del>	Address:		
A				
ARTICLE VI	REGISTERED AGENT			
	orida street address (P.O. Box NOT	acceptable) of the registere	d agent is:	
Name:	Kelly Kennedy			
	2954 Maple Court			
Address:	Dunedin, FL 34698	<del></del>		
ARTICLE VII	INCORPORATOR			
	dress of the Incorporator is:			
Name:	Kelly Kennedy			
Address:	2954 Maple Court			
	Dunedin, FL 34698			
Having been nan certificate, I am fa	ned as registered agent to accept se amiliar with and accept the appointn	rvice of process for the ab nent as registered agent and	ove stated corporation at the place designate d agree to act in this capacity	ed in this
. ده الأ	Paral.		2 11X 11H	
- rung	Required Signature of Regis	stered Agent	Date	
	ment and affirm that the facts stated t of State constitutes a third degree fo		re that any false information submitted in a d 17.155, F.S.	ocument
Kuy	Required Signature of	Lacomondo	2/18/14	
O	Required Signature or	теогрогатог	Date	