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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: Economic Development Council of Wellington, 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: John A. Van Dell
Name (Printed or typed)

13860 Wellington tree #20
Address

Wellington, Fl. 33414
City, State & Zip

561-793-2661
Daytime Telephone number

vandell@msn.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 I NAME

The name of the corporation shall be: Economic Development Council of Wellington, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:

13860 Wellington Trace

20

Wellington, Fl. 33414

Mailing address, if different is:

13860 Wellington Trace

20

Wellington, Fl. 33414

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: exclusively for Charitable, Community economic development, educational, and Scientific purposes.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

Are set forth in the By-Laws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John A. Van Dell - Director Name and Title: _____

Address: 13860 Wellington Address: _____

trace # 20
Wellington, Fl. 33414

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 MAY -6 AM 9:56

FILED

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:

John A. Van Dell

Address:

13860 Wellington Tr. # 20
Wellington Fl. 33414

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

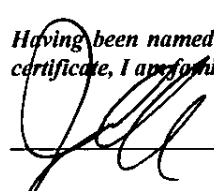
Name:

John A. van Dell

Address:

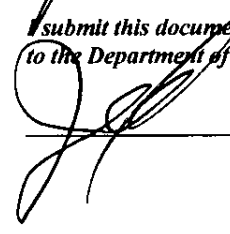
13860 Wellington Tr. # 20
Wellington Fl. 33414

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


Required Signature of Registered Agent

4/30/14
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.


Required Signature of Incorporator

4/30/14

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