

**N14000004641**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

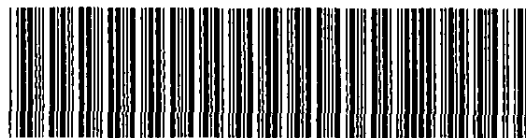
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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DIVISION OF REGISTRATION

*κ 05/15/14*

**CSC.**

CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 129661 7995639

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : May 13, 2014

ORDER TIME : 2:33 PM

ORDER NO. : 129661-005

CUSTOMER NO: 7995639

DOMESTIC FILING

NAME: ST GEORGES FAIRE INC

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP  
       ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

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

**SUBJECT:** St Georges Faire 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:** Donald B. Rhodes

\_\_\_\_\_  
Name (Printed or typed)

810 Hibiscus Street

\_\_\_\_\_  
Address

Atlantic Beach, FL 32233

\_\_\_\_\_  
City, State & Zip

904-866-1615

\_\_\_\_\_  
Daytime Telephone number

sebastia@clearwire.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: St Georges Faire Inc

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address:  
810 Hibiscus St

Mailing address, if different is:

Atlantic Beach, FL 32233

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: The Saint Georges Faire Inc. is organized exclusively for charitable  
and educational purposes, more specifically to develop a self-sustaining, reasonably authentic, and competitively  
differentiated facility to host regular re-enactment events with much greater capabilities and atmosphere than current  
options in support of and in cooperation with selected for-profit and non-profit organizations and their local chapters (e.g.  
SCA, Inc., Renaissance Fairs).

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

**ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	<u>Donald B. Rhodes, President</u>	Name and Title:	_____
Address	<u>810 Hibiscus St</u>	Address:	_____
	<u>Atlantic Beach, FL 32233</u>		_____
	_____		_____
Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____
Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
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	_____		_____

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 MAY 14 AM 8:42

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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: Donald B. Rhodes  
Address: 810 Hibiscus Street  
Atlantic Beach, FL 32233

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Donald B. Rhodes  
Address: 810 Hibiscus Street  
Atlantic Beach, FL 32233

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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  
Corporation Service Company

By: Donald B. Rhodes  
Required Signature of Registered Agent

5/13/2014  
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.

Donald B. Rhodes  
Required Signature of Incorporator

5/13/2014  
Date