

NA000004339

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

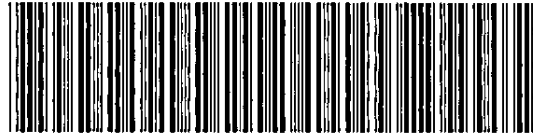
(Business Entity Name)

(Document Number)

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SECTION OF STATE
TALLAHASSEE, FLORIDA

14 MAY 19 PM 12:29

APPROVED
AND
FILED

COVER LETTER

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

SUBJECT: **Keep It Rural, 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: **Richard Zelznak**
Name (Printed or typed)

8794 Megans Lane
Address

Tallahassee, FL 32309
City, State & Zip

850-321-9250
Daytime Telephone number

rzeznak@gmail.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: Keep It Rural, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
Jeff Blair

9143 Stargate Way

Tallahassee, FL 32309

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

The Corporation is organized as a nonprofit corporation and shall be operated exclusively for charitable purposes expressed within the meaning of Section 501(c)(3) of the Internal Revenue Code:

The purposes for which the Corporation is formed are exclusively educational and scientific, to wit: (a) To collect and disseminate information with the goal of protecting the rural nature of Leon County.

(b) To promote public awareness pertaining to the impact of development on the rural character of Leon County and to support and defense against potential impacts to the rural character.

(c) To receive and administer funds for educational and scientific purposes and to that end take an hold by bequest, devise, gift, grant, purchase lease or otherwise any property; to sell, convey or otherwise

dispose of any funds or property in such manner that will best promote the purposes of the Corporation without limitations except those contained in the Articles of Incorporation.

(d) Without limitations, the purpose of the Corporation shall be the education of and defense of the rural character of Leon County through presentations in public and private gatherings, by participation in public dialog including, but not limited to legal proceedings.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: _____

The initial directors are to be appointed by the standing board of directors which were self-appointed. The term of appointment is two years and may be renewed twice.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jeff A. Blair, President

Address 9143 Stargate Way
Tallahassee, FL 32309

Name and Title: Thelma Crump, Vice President

Address: 8848 Miccosukee Road
Tallahassee, FL 32309

Name and Title: Rob Lombardo, Secretary

Address 9601-54 Miccosukee Road
Tallahassee, FL 32309

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 MAY 19 PM 12:29

APPROVED
AND
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: Jeff A. Blair

Address: 9143 Stargate Way

Tallahassee, FL 32309

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Richard Zelznak

Address: 8794 Megans Lane

Tallahassee, FL 32309

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

5/10/14
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

Date

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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AND
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