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0.00 g Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Cop & Certificate
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Name (Printed or typed)

2872 WEST ELSTON DR.

Address

DELTONA, FL 32738

City, State & Zip

407-562-6291

Daytime Telephone number

nprmadeltona@gmail.com

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

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



June 12, 2014

NATIONAL PUERTO RICO MOTORCYCLE ASSOC. DELTONA 2872 W ELSTON DR DELTONA, FL 32738

SUBJECT: NATIONAL PUERTO RICO MOTORCYCLE ASSOCIATION

DELTONA CHAPTER, INC. Ref. Number: W14000036641

We have received your document for NATIONAL PUERTO RICO MOTORCYCLE ASSOCIATION DELTONA CHAPTER, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 605.0206, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

Please find enclosed a new form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Carol Mustain Regulatory Specialist II

Letter Number: 814A00012772

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

The name	e of the corporation shall be:	го вісо мото	PRCYCLE ASSOCIATION DELTONA	CHAPTER,INC
ARTICL				
<u>.</u>	Principal street address: 2872 WEST ELSTON DR		Mailing address, if different is:	
	DELTONA, FL 32738			
_				
ARTICL				
	ose for which the corporation is organized is: PROMOTE THE MOTOR	CYCLE	LIFESTYLE AND PRO	OTECT
	FUTURE OF MOTORCY			<u> </u>
<u> </u>				SEC.
			ω C	957 1
			70	LEĎ LY OF CORP
				STAI
ARTICL	E IV MANNER OF ELECTION The m	anner in which th	e directors are elected and appointed:	ORIEN VOTE
ARTICL	E V INITIAL OFFICERS AND/OR DI	RECTORS		
Name and	Title: HECTOR RAMIREZ - PRESIDENT	Name and Title	MILTON TORRES - VICE PRESIDENT	
Address	2872 W. ELSTON DR.	Address:	1817 ULSER AVE.	
	DELTONA, FL 32738		DELTONA, FL 32738	
Name and	Title: GARY ROGERS - TREASURER	Name and Title	RACHEL BRANDENBURG - SECRETARY	
Address	2873 W. ELSTON DR	Address:	2872 W. ELSTON DR.	
	DELTONA, FL 32738		DELTONA, FL 32738	
Name and	Title:	Name and Title		
Address				

Name and Title:	Name and Title:	
Address	Address:	
Name and Title:	Name and Title:	
Address	Address:	
		
ARTICLE VI REGISTERED AGEN The name and Florida street address (P.O. E	T Box NOT acceptable) of the registered agent is:	
~ · · · —	suces.	
Address: 1817 UISt	er Ave.	
Deltary 1	=1 32738	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:		
Name: Name:	orandeaburg	
Address: 2872 \N. 5	, <u> </u>	
Deltara,	F1 32738	
certificate, I am familiar year and accept the	accept service of process for the above stated co appointment as registered agent and agree to acc	orporation at the place designated in this t in this capacity
- Allan	k	(0/2/14
Required Signature	of Registered Agent	Date
	cts stated herein are true. I am aware that any fo degree felony as provided for in s.817.155, F.S.	alse information submitted in a document
		10/2/14
Required Sign	nature of Incorporator	Date