

N140000006272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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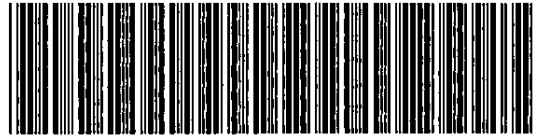
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: **Palatka Blue Crab Festival, 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: **Charles Rudd**
Name (Printed or typed)

P.O. Box 1054
Address

Palatka, FL 32178
City, State & Zip

386-329-0100, ext. 333
Daytime Telephone number

palatkamainstreet@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: Palatka Blue Crab Festival, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
205 N. 2nd Street

Palatka, FL 32177

Mailing address, if different is:
P.O. Box 1054

Palatka, FL 32178

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to conduct the annual Palatka Blue Crab Festival on the riverfront in downtown Palatka, Florida in order to assist in the revitalization and economic development of downtown Palatka.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Appointed
by the Executive Committee of the Palatka Main Street Board of Directors.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jerry Hafner, President

Address: 122 Hilty Lane
East Palatka
Florida, 32131

Name and Title: Susan Detar, Secretary

Address: 306 Oak Street
Palatka, FL
32177

Name and Title: Robert Taylor, Director

Address: 710 St. Johns Avenue
Palatka
Florida, 32177

Name and Title: Elizabeth van Rensburg, V.P.

Address: 310 N. 3rd Street
Palatka
Florida, 32177

Name and Title: Art Leary, Treasurer

Address: 601 Reid Street
Palatka, FL
32177

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Charles Rudd
Address: 205 N. 2nd Street
Palatka, FL 32177

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Charles Rudd
Address: 205 N. 2nd Street
Palatka, FL 32177

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

6/25/14

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

6/25/14

Date