

COVER LETTER

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

SUBJECT: North East Polk Arts Association, 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 L. Wood
Name (Printed or typed)

2983 Sequoyah Drive
Address

Haines City, FL 33844
City, State & Zip

863-438-6221
Daytime Telephone number

nepolkartsassociation@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: North East Polk Arts Association, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2983 Sequoyah Drive

Mailing address, if different is:
Haines City, FL 33844

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

The corporation known as the North East Polk Arts Association, Inc. will serve, advance, and lead an environment that promotes the arts through economic development, sustainability, education, cultural heritage and support of the Arts in North East Polk County, Florida. This corporation is organized and shall be operated exclusively within the meaning of the Internal Revenue Code §501(c)(3).

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed _____

Officers and Directors were elected by majority vote at full Board Meeting.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Matina Wagner, President
Address: 123 Loma Bonita Drive
Davenport, FL 33837

Name and Title: Amy Arrington, Vice President
Address: 160 Whispering Pines Way
Davenport, FL 33837

Name and Title: Paul W. Gerrard, Jr, Treasurer
Address: 540 Greenway Dr.
Lake Wales, FL 33898

Name and Title: Allison Beeman, Secretary
Address: 124 Lake Otis Road
Winter Haven fl 33884

Name and Title: Jenna Emerson, Member
Address: 100 Lem Carnes Road
Davenport, FL. 33837

Name and Title: Matt Lukens, Member
Address: 128 Lake Morton Drive
Lakeland, FL 33801

RECORDED
14 AUG - 1 AM 11:12
POLK COUNTY, FLORIDA

Name and Title: Dave Smith, Member
Address: 105 Ariana Ave.
Auburndale, FL 33823

Name and Title: Jonathan Evans, Member
Address: 1372 Rebecca Drive
Haines City, FL 33844

Name and Title: John L. Wood, Executive Director
Address: 2983 Sequoyah Drive
Haines City, FL 33844

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Kevin A. Ashley
Address: 199 Avenue B, N.W. Suite 200
Winter Haven, FL 33881

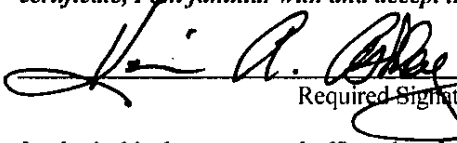
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
14 AUG - 1 AM 11:12

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: John L. Wood
Address: 2983 Sequoyah Dr.
Haines City, FL 33844

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

July 29, 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.



Required Signature of Incorporator

July 29, 2014
Date