N14000009649

(Re	equestor's Name)	
. (Ad	ldress)	
(Ad	ldress)	
(Cit	ry/State/Zip/Phone	; #)
PICK-UP	WAIT	MA!L
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
-W14-	6/4b/	

Office Use Only



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SECRETARY OF STATE

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COVER LETTER

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

SUBJECT:	Sarasota Design District, 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: Michael Bush

Name (Printed or typed

741 Central A

Address

Sarasota FL. 3434 City, State & Zip

941.366.6690 Davime Telephone number

Mbush Chimeresource. Cerm E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 8, 2014

MICHAEL BUSH 741 CENTRAL AVENUE SARASOTA, FL 34236

SUBJECT: SARASOTA DESIGN DISTRICT, INC.

Ref. Number: W14000061461

We have received your document for SARASOTA DESIGN DISTRICT, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 114A00021553

ARTICLES OF INCORPORATION

1*		OF INCOR n Chapter 617, F	PORATION .S., (Not for Profit)	APPROVIDE
ARTICLE I	he corporation shall be: Sara 80 ta	Oesign	District, Inc	. AND FILED
ARTICLE II		•		14'0C7 16 PM 4: 3
ュ	Principal <u>street</u> address: 41 Central Aul.		Mailing address, if differe	nt is: SECRETARY OF STATE FLORIDA
\geq	arasota, FL. 34231,	o		
		_		
ARTICLE II	TI PURPOSE for which the corporation is organized is:		usola Design Distri	
	Catalyst to promote 4	j.	\	1
geographi	ical area. It's mission	is to Sur	part art architect	we interior design.
	gs 4 related industry in a			
sincss	-deducational apportu	nities in	nthe Sarasoka De	sígn District
ntribut	ing to the greater whole	of Saras	ota. The Sarusota	Deign Pistrict
ill strive	to educate umentor	our am	meming in the a	rena of design
ARTICLE I		anner in which th	ne directors are elected and appoint	ed: Nominated
~ Voted	upon.			
ARTICLE	V INITIAL OFFICERS AND/OR DI	RECTORS		
Name and Titl	le: Marcus Anast Proje	Chame and Title	: Karen Mc Keivie	ur, vice-Resident
Address	741 Central Are.	Address:	425 Central Ac	<u>~'.</u>
	Sarasota, FL. 34236		Sarasota, FL.3	1236
			6	
Name and Titl	Greg Hall Secretary			
Address	513 Central Aur.			
	Sarasota, FL. 34236		Sorasota, FL:	34236
Name and Titl	emichael Bush, Memberat	James and Title	. NA	
Address	741 Central Avr.	Address:	• • • • • • • • • • • • • • • • • • • •	
	Sarasota, Fl. 3423L			

	11		N.	APPROVEL AND	
Name and Title:_	NA	Name and Title:_	NA		
Address	,	_ Address:		14 OCT 16 PM 4: 30	
_				SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Name and Title:	N A	Name and Title:_	NA		
Address	•	Address:	· · · · · · · · · · · · · · · · · · ·		
_					
ARTICLE VI The name and Flo	REGISTERED AGENT rida street address (P.O. Box NOT acce	eptable) of the registe	red agent is:		
Name:	Michael Bush				
Address:	741 Central Aur.				
	Sarasota, FL. 3423	34			
ARTICLE VII The name and add	INCORPORATOR lress of the Incorporator is:				
Name:	Nicole Chapman				
Address:	137354St.				
	Darasota, FL. 347	236			
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					
λJ	my 5		10	0/3/2014	
	Required Signature of Registered	i Agent		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.					
Decole	Clapman Required Signature of Incom	morator		10/3/14	
(Required Signature of Theol	грогатог		+ Da≰C	