

N14000010277

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

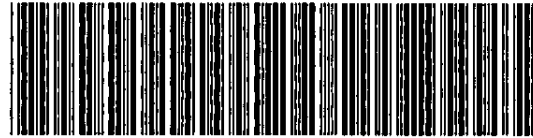
(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 NOV -5 PM 4:58

FILED

NOV 6 2014
S. GILBERT



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
14 NOV -5 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

October 20, 2014

MELISSA DEPREM
464 CRUZ BAY CIRCLE
WINTER SPRINGS, FL 32708

SUBJECT: BEAR FOUNDATION
Ref. Number: W14000063725

We have received your document for BEAR FOUNDATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Bylaws are not filed with this office. Please retain them for your records.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

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.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 614A00022442

COVER LETTER

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

SUBJECT: Bear Foundation 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

*already
paid*

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Melissa DePierro

Name (Printed or typed)

464 Cruz Bay Circle

Address

Winter Springs, FL 32708

City, State & Zip

407-256-0635

Daytime Telephone number

melissa@pembertoninc.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: Bear Foundation Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
464 Cruz Bay Circle

Winter Springs, FL 32708

Mailing address, if different is:

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: raise funds and help support building improvements for Winter Springs High School

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: _____

Voting

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Deborah Montevechi President

Address: 209 Shore Road
Winter Springs, FL 32708

Name and Title: Melissa DePierro Treasurer

Address: 464 Cruz Bay Circle
Winter Springs, FL 32708

Name and Title: Theresa Bush Secretary

Address: 105 Mockingbird Lane
Winter Springs, FL 32708

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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: Melissa DePierro

Address: 464 Cruz Bay Circle

Winter Springs, FL 32708

ARTICLE VII INCORPORATOR

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

Name: Deborah Montevechi

Address: 209 Shore Road

Winter Springs, FL 32708

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

10/27/14
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

10/27/14
Date