

N 14000011061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

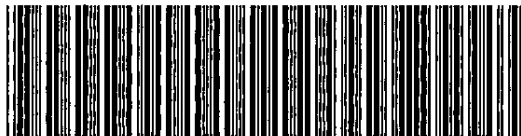
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14 DEC - 1 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

Handwritten signature

COVER LETTER

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

SUBJECT: Florida Chapter of Alpha Zeta, 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: Jennifer West
Name (Printed or typed)

838 SW 9th St.
Address

Gainesville, FL 32601
City, State & Zip

813-935-7306
Daytime Telephone number

fl.az.officers@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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: Florida Chapter of Alpha Zeta, Inc.

14 DEC -1 PM 2:01

ARTICLE II PRINCIPAL OFFICE

Principal street address:

2002 McCarty Hall

PO Box 110270

Gainesville, FL 32601

Mailing address, if different:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to foster & commend high standards
of scholarship, character, leadership & a spirit of fellowship
among all brothers of vision, unity of action & accomplishment
of ideals; to render services to the students &
agricultural divisions of the University of Florida

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Officers
are elected on a 50% majority vote following nomination

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: TOM TRAVIS, President

Address:

4000 37th St. Blvd.

Apt 434 A

Gainesville, FL 32608

Name and Title: JENNIFER WEST, Censor

Address:

838 SW 9th St.

Gainesville, FL 32601

Name and Title: Blake Klein, scribe

Address:

36020302 Keys Complex

Gainesville, FL 32602

Name and Title: Jessica Fernandez, Treasurer

Address:

3000 SW 35th Pl

Apt H 110

Gainesville, FL 32608

Name and Title: Christine Adams, Chancellor

Address:

106 NW 10th St.

Gainesville, FL 32601

Name and Title: Amely Jimenez, Pledge Master

Address:

2841 SW 13th

Apt I 336

Gainesville, FL 32608

Name and Title: Alexis Curtin, Service Chair

Address: 411 SW 10th St.
Gainesville, FL 32601

Name and Title: Bailey Gamage, Social Chair

Address: 14495 NW 174th Ave.
Alachua, FL 32615

Name and Title: Morgan Kubis, Sentinel

Address: 2701 SW 13th St.
Apt H 13
Gainesville, FL 32608

Name and Title: Colley Stelter, Fundraising Chair

Address: 121 SW 32nd St.
Gainesville, FL 32607

ARTICLE VI REGISTERED AGENT

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

Name: TOM TRAVIS

Address: 4000 SW 37th St. Bldg. Apt 434A
Gainesville, FL 32608

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JENNIFER WEST

Address: 838 SW 9th St.
Gainesville, FL 32601

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPROVED
AND
FILED

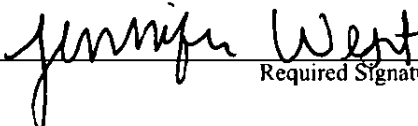
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature of Registered Agent

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

Date