N15000002346

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
<u></u>	· · · · · · · · · · · · · · · · · · ·	

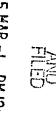
Office Use Only



700270193097

03/04/15--01010--009 **87.50

SECRETARY OF STATE





COVER LETTER

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

SUBJECT:	IBHA FLOG	INC.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLUI</u>	DE SUFFIX)
Enclosed is an original a	nd one (1) conv of the Ar	ticles of Incorporation and	a check for
Likiosoa is an originar a	and one (1) copy of the Ai	neles of incorporation and	, a check for .
\$70.00	\$78.75	□\$78.75	\$87.50
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,
	Certificate of	& Certified Copy	Certified Copy
	Status		& Certificate
		ADDITIONAL CO	PY REQUIRED

FROM:		
	Name (Printed or typed)	
	3717 Pioneer Trail	
	New Smyrna Bch, Fl 3216° Jcity, State & Zip	Ş
	386-547-6979	
	Daytime Telephone number	
	LASalon 20 hot mail rom	
5	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)



The name of the	NAME corporation shall be:	NBHA	FL09	INC.	
ARTICLE II	PRINCIPAL OFFIC		, - 0 ,	<u> </u>	15 MAR -4 PM 12: 10
ARTICUS II	•				SECRETARY OF STATE
~	Principal street address			Mailing a	ddress If different is: FLORIDA
3	717 Plone	r ir.			
N	ew Smyrna	z Bch.	<u> F(. </u>		
	J	32			
ARTICLE III	PURPOSE	: C	· duin	ملاماه	Cartain Matina
The purpose for	r which the corporation is	organized is:	X CUISIV	$\frac{2}{1}$	foster national
					and conduct
				, v	and develop
amat	eur athe	letes fe	er that	compet	tition.
Am man	deg: dissoluti	(M)-			
	ALLY WILLIAM STATE OF THE STATE				
ARTICLE IV	MANNER OF ELE	CTION The ma	anner in which the	directors are ele	cted and appointed:
	volunteer				
ARTICLE V	INITIAL OFFICE	RS AND/OR DII	RECTORS		
		1			
Name and Title:	Lori Butle	r pres.	Name and Title:_		
Address	3717 Ploneer	·TR.	Address: _		
{	New Smyrna	BOHIFL	_		
	J	32168			
Name and Title:	Melissa W	i	Name and Title:_		
	1028 Lake as	ŲΟ.			
_	lew Smyrna	_ ` _	_	•	
`-	- rigr ria		_		
-	m . i . o	32168	_		
	Meghann Da				**************************************
	440 SW 430d		Address:		
-	Ocala, Fl.		_		
	•	34481			

•	•		AFPAUVEL
Name and Titl	Name	and Title:	
Address	Addre	SS:	15 MAR -4 PH 12: 16
			SECHETARY OF STATE TALLAHASSEE FLORIDA
ame and Title	: Name	and Title:	
ldress	Addres	ss:	
RTICLE VI	DPGICTPDPD ACPLM		
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name:	Lori Butler		
Address:	3717 Ploneer Trail	_	
	New Smyrna, Bch. Fl		
<i>RTICLE VI</i>	INCORPORATOR address of the Incorporator is:		
Name:	Lori Buller		
Address:		_	
. 144	Mew Smyrna Bch. Fl 3	2168	
	amed as registered agent to accept service of proce familiar with and accept the appointment as registe		
Ĺ	Losi Butler		2/20/15
	Required Signature of Registered Agent		Date
	cument and affirm that the facts stated herein are tr ent of State constitutes a third degree felony as provi		rlse information submitted i
メ	ori Butles		0/20/15 Date
1	Required Signature of Incorporator		Date
LO	ri Butler		

Article (III) (Ammended) Specific purpose for which this corporation is organized is: Exclusively to foster national amateur barrel racing competitions and conduct barrel racing competitions to support and develop amateur athletes for that competition. Dissolution (New article) this organization is organized exclusively for charitable purposes under section 501(e) B) of the Interal Revenue code, or Corresponding Section of any future tax code. Upon of this organization for one or more exempt purposes within the meaning of 501(c)(s) of the Internal Revenue Code, or shall be distributed to the Federal Government, or to a state or local government, for a public purpose