

NI SOLD 02964

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

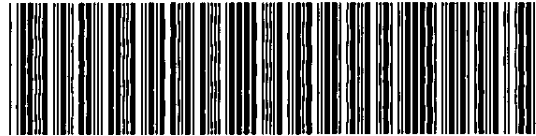
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DEPARTMENT OF STATE
15 MAR 23 PM 4:02

15 MAR 23 AM 8:40

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

THE SQUIRES CLUB, INC.

Signature _____

Requested by: BA

03/23/15

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____



Art of Inc. File _____

____ LTD Partnership File _____

____ Foreign Corp. File _____

____ L.C. File _____

____ Fictitious Name File _____

____ Trade/Service Mark _____

____ Merger File _____

____ Art. of Amend. File _____

____ RA Resignation _____

____ Dissolution / Withdrawal _____

____ Annual Report / Reinstatement _____

____ Cert. Copy _____



Photo Copy _____

____ Certificate of Good Standing _____

____ Certificate of Status _____

____ Certificate of Fictitious Name _____

____ Corp Record Search _____

____ Officer Search _____

____ Fictitious Search _____

____ Fictitious Owner Search _____

____ Vehicle Search _____

____ Driving Record _____

____ UCC 1 or 3 File _____

____ UCC 11 Search _____

____ UCC 11 Retrieval _____

____ Courier _____

ARTICLES OF INCORPORATION

OF

THE SQUIRES CLUB, INC.
(A Florida not-for-profit corporation)

The undersigned incorporator, for the purpose of forming a Florida not-for-profit corporation, hereby adopts the following Articles of Incorporation.

ARTICLE I: Name

The name of this corporation shall be:

THE SQUIRES CLUB, INC.

ARTICLE II: Principal Office and Mailing Address

The principal place of business shall be:

3900 1st Street N., Suite 203
St. Petersburg, FL 33703

The mailing address of the corporation is:

P.O. Box 4128
St. Petersburg, FL 33731-4128

ARTICLE III: Purpose

The corporation is organized exclusively for social, recreational and other similar non-profitable purposes within the requirements of Internal Revenue Code 501(c)(7) of the Internal Revenue Code of 1986. And, to that end, to take and to hold by bequest, devise, gift, grant, purchase, lease or otherwise any property, real or personal, including monetary funds, and to administer said property and funds for all lawful purposes provided that said purposes are not for monetary profit, including, without limitation, to provide an organization through which persons with similar interests and involvement, may participate in social activities including smokers, club trips and other social events as the Corporation may organize which will best promote the purpose of the organization.

ARTICLE IV: Manner of Election of Directors

The manner in which the directors are appointed is stated in the bylaws.

15 MAR 23 AM 8:40

ARTICLES OF INCORPORATION

OF

THE SQUIRES CLUB, INC.
(A Florida not-for-profit corporation)
(Continued)

ARTICLE V: Initial Officers

The names and addresses of the initial officers are:

Doug Corey
12605 Automobile Boulevard
Clearwater, FL 33762

President

Robert P. Clark
3901 13th Way N.E.
St. Petersburg, FL 33704

Secretary

Patrick Kraujalis
3900 1st Street N
St. Petersburg, FL 33703

Treasurer

ARTICLE VI: Initial Registered Agent

The name and address of the initial registered agent is:


John N. Bowman
1636 First Avenue North
St. Petersburg, FL 33703

ARTICLE VII: Incorporator

The name and street address of the incorporator to these Articles of Incorporation is:

John N. Bowman
1636 First Avenue North
St. Petersburg, FL 33713

The undersigned incorporator has executed these Articles of Incorporation this 23th day of March, 2015.


(Signature)

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.


1. The name of the corporation is:


THE SQUIRES CLUB, INC.

2. The name and address of the registered agent and office is:

John N. Bowman
1636 First Avenue North
St. Petersburg, FL 33713

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Signature


Date