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15 MAY 22 AM 11:27

COVER LETTER

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

SUBJECT: The Rider Life Fund, 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: Malinda S. Dowling

Name (Printed or typed)

402 Brady Way

Address

Panama City Beach, FL 32408

City, State & Zip

850-333-4598

Daytime Telephone number

hdriderlife@gmail.com

E-mail address: (to be used for future annual report notification)

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

Copy

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAMEThe name of the corporation shall be: The Rider Life Fund, Inc**ARTICLE II PRINCIPAL OFFICE**Principal street address:402 Brady WayPanama City Beach, FL 32408

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To help fellow motorcycle riders in the event of an accident or injury; to help alleviate immediate financial burdens as funds allow.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Randy Greene, P</u>	Name and Title:	<u>Barry Thompson, AMBR</u>
Address	<u>605 Gardenia St.</u>	Address:	<u>PO Box 9183</u>
	<u>Panama City Beach, FL 32407</u>		<u>Panama City Beach, FL 32417</u>
Name and Title:	<u>Johnny Peters, V</u>	Name and Title:	<u>Malinda Dowling, ST</u>
Address	<u>14825 Front Beach Rd, Unit 2203</u>	Address:	<u>402 Brady Way</u>
	<u>Panama City Beach, FL 32413</u>		<u>Panama City Beach, FL 32408</u>
Name and Title:	<u>Gary "Chopper" Warren, AMBR</u>	Name and Title:	
Address	<u>223 Lake View Cir.</u>	Address:	
	<u>Panama City Beach, FL 32413</u>		

15 MAY 22 AM 11:27

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: Malinda Dowling
Address: 402 Brady Way
Panama City Beach, FL 32408

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Malinda Dowling
Address: 402 Brady Way
Panama City Beach, FL 32408

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

Apr, 14, 2015
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

Apr, 14 2015
Date

Copy