

NIS00007914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

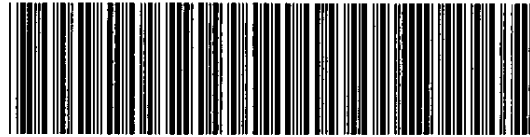
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
ATTENTION: FIDUCIARY

15 AUG 10 PM 5:43

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AUG 14 2015

W PAINTER

COVER LETTER

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

SUBJECT: Boys & Girls Clubs of Escambia County, 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: Shervin Rassa

Name (Printed or typed)

923 Denton Blvd. NW

Address

Fort Walton Beach, FL 32547

City, State & Zip

850-862-1616

Daytime Telephone number

srassa@bgcec.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: Boys & Girls Clubs of Escambia County, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2751 N. "H" Street

Pensacola, FL 32501

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The general nature of the objects and purposes of this corporation shall be:

To provide behavior guidance and to promote the health, social, educational, vocational and character development of boys & girls;
to receive, invest and disburse funds, and to hold property for the purposes of the corporation.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Elected at annual Mtg

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shervin Rassa, Name and Title: Todd Wilkinson, Chairman of the Board

Address: 923 Denton Blvd. NW Address: 923 Denton Blvd. NW
Fort Walton Beach, FL 32547 Fort Walton Beach, FL 32547

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

15 AUG 10 PM 5:43
CLERK OF COURT
JANICE L. HARRIS
CLERK OF COURT
JANICE L. HARRIS

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: Shervin Rassa

Address: 923 Denton Blvd. NW

Fort Walton Beach, FL 32547

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Shervin Rassa

Address: 923 Denton Blvd. NW

Fort Walton Beach, FL 32547

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15 AUG 10 PM 5:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

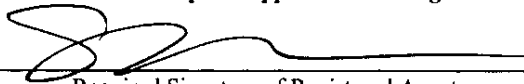
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)


Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

8/6/15
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

8/6/15
Date

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

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Fort Walton Beach, FL 32547 Fort Walton Beach, FL 32547

Name and Title: Name and Title:

Address: Address:

Name and Title: Name and Title:

Address: Address:

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SECRETARY OF STATE
TALLAHASSEE, FL 32310

FILED

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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Name: Shervin Rassa

Address: 923 Denton Blvd. NW

Fort Walton Beach, FL 32547

FILED
15 AUG 10 PM 5:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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The name and address of the Incorporator is:

Name: Shervin Rassa

Address: 923 Denton Blvd. NW

Fort Walton Beach, FL 32547

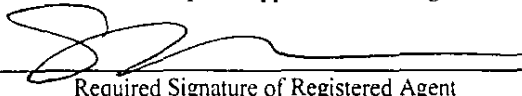
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Effective date, if other than the date of filing: _____ (OPTIONAL)

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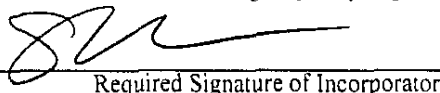
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8/6/15
Date