N/50000939/

/D-					
(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	ısiness Entity Nar	ne)			
(Do	cument Number)				
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					





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07/24/15--01011--018 **78.75

DIVISION OF CORPORATIONS

W15-05/220

09/28/15



FLORIDA DEPARTMENT OF STATE Division of Corporations

RESERVED

15 SEP 24 AM 9: 34

ALLANADOLL FLUGÜA

July 29, 2015

CECELIA YOUNG 4327 SW 106TH LOOP LAKE BUTLER, FL 32054

SUBJECT: UNION COUNTY BEEKEEPERS

Ref. Number: W15000051220

We have received your document for UNION COUNTY BEEKEEPERS and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The name of the entity must be identical throughout the document.

Bylaws are not filed with this office. Please retain them for your records.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 715A00015887

COVER LETTER

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

SUBJECT: Union Coun	ty Beekeepers			
Sebazer.	(PROPOSED CORPO	RATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)	
Enclosed is an original	and one (1) copy of the Artic	les 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 CO	PY REQUIRED	
FROM:	Cecelia E Young Name	(Printed or typed)	-	
4327 SW 106th Loop Address				
	Lake Butler,Florida, 32054	Address		
	Ci	ty, State & Zip	-	

386-496-1534

youngcae@cedartechnology.com

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

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

Daytime Telephone number

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

<u>ARTICLE II</u>	PRINCIPAL OFFICE		
25 N	Principal street address: E 1st Street, Lake Butler, Florida, 32054	Mailing address, if	different is:
		<u> </u>	
	PURPOSE or which the corporation is organized is omote practical beekeeping methods.	dedicated to scie	ntific and educational activities
ARTICLE IV	MANNER OF ELECTION The m	nanner in which the directors are elected and appoin	nted: Elected yearly
ARTICLE IV ARTICLE V	INITIAL OFFICERS AND/OR DIR		01 SE
ARTICLE V	INITIAL OFFICERS AND/OR DIR Cecelia Young, President		SECRETA DIVISION OF 15 SEP 2
ARTICLE V Name and Title	INITIAL OFFICERS AND/OR DIR	ECTORS Name and Title:	SECRETARY OF STADIVISION OF CORPORA. 15 SEP 24 AN 10:
	Cecelia Young, President 4327 SW 106th Loop, Lake Butler, FL., 32053 Nancy Brewer, Sect/Treasurer	ECTORS Name and Title:	SECRETARY OF CORPC
ARTICLE V Name and Title Address	Cecelia Young, President 4327 SW 106th Loop, Lake Butler, FL., 32053	ECTORS Name and Title: Address:	SECRETARY OF STADIVISION OF CORPORA. 15 SEP 24 AN 10:
ARTICLE V Name and Title Address Name and Title	Cecelia Young, President 4327 SW 106th Loop, Lake Butler, FL., 32053 Nancy Brewer, Sect/Treasurer 6135 SW 57th Lane Lake Butler, Fl., 32054	ECTORS Name and Title: Address: Name and Title:	SECRETARY OF STATE OIVISION OF CORPORATION: 15 SEP 24 AM 10: 30
ARTICLE V Name and Title Address Name and Title Address	Cecelia Young, President 4327 SW 106th Loop, Lake Butler, FL., 32053 Nancy Brewer, Sect/Treasurer 6135 SW 57th Lane Lake Butler, Fl., 32054	ECTORS Name and Title: Address: Name and Title: Address:	SECRETARY OF STATE OIVISION OF CORPORATION: 15 SEP 24 AM 10: 30

Name and Title:_		Name and Title:	
Address		Address:	
			•
Name and Title:		Name and Title:	
Address		Address:	
_			
	REGISTERED AGENT prida street address (P.O. Box NOT accept	table) of the registered egent is:	
Name:	Cecelia Young		
Address:	4327 SW 106th Loop	· ·	
11441033.	Lake Butler,Fl.,32054		
			15 S
	INCORPORATOR dress of the Incorporator is:		SEP
Name:	Nancy Brewer		TAR OF C
Address:	6135 SW 57th Lane		Ö [™] m:
	Lake Butler,Fl.,32054		OF SIALE RPORATION
Effective date, if o	EFFECTIVE DATE: other than the date of filing:	(OPTIONAL)	U 3
(If an effective da after the filing.)	ate is listed, the date must be specific and	d cannot be more than five business days prior or 90 b	ousiness days
	inserted in this block does not meet the appive date on the Department of State's recor	plicable statutory filing requirements, this date will not be ds.	listed as the
		of process for the above stated corporation at the place registered agent and agree to act in this capacity	designated in this
	action young	7/21/2014	
	Required Signature of Registered A	Agent Date	***************************************
I submit this docu to the Department	ment and affirm that the facts stated herei of State constitutes a third degree felony a	n are true. I am aware that any false information submit is provided for in s.817.155, F.S.	ted in a document
Jamy Prusage Required Signature of Incorporator		7/21/2014	
	Required Signature of Incorp	orator Date	