NISOUD 11/27

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

Office Use Only

W/Swu> 61256

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T. SCOTT



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FLORIDA DEPARTMENT OF STATE Division of Corporations

TALLAHASSEE, FLORIDA

October 9, 2015

WILLIAM J. SPECHT 2729 SE 48TH AVE OCALA, FL 34480

SUBJECT: IGNITE OCALA INC. Ref. Number: W15000067256

We have received your document for IGNITE OCALA INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

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Tyrone Scott Regulatory Specialist II Letter Number: 615A00021473
New Filings Section

COVER LETTER

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

SUBJECT:	<u> </u>	Ocala I			
	(PROPOSED CORPO	RATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)		
	,				
Enclosed is an original ar	nd one (1) copy of the Artic	cles 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: _	William :	J. Specht e (Printed or typed)	_		
	2729 SE	48th ave Address	_		
	Ocala, Fl	34480	_		
	352-812	-1491	_		
	Daytime Telephone number				

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

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

Spech+@ Peak 4 Mail. com

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

ARTICLE I NAME The name of the corporation shall be: 19n.+e	Ocala Inc.
ARTICLE II PRINCIPAL OFFICE Principal street address:	Mailing address, if different is:
2729 SE 48th and Ocala, FC 34480	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Promute local Churche	worship God and
ARTICLE IV MANNER OF ELECTION The manner in which to by laws.	the directors are elected and appointed: as stated in the
Name and Title: William J. Speeled Name and Address Ocala Fl. 34480	
Name and Title: John McGhee Name and Address: 13695 N. US Hay Address: 441	d Title: Vice President
Citra Fl. 32113 Name and Title: Lawren Specht Name and Address Ocala Fl. 32113 Name and Title: Lawren Specht Name and Address Ocala Fl. 32113	d Title: Teasurer with the second of the sec

Name and Title: Cuz Mc Ghe Address 13695 N- U.S	. 4	Sacreta	
Name and Title: Cu Z / V C Gye	Name and Title:	Secretary	
Address $13695 \mathcal{N}_{-} \mathcal{U}_{-} \mathcal{S}_{-} $	i. Hwy Address:	· · · · · · · · · · · · · · · · · · ·	
441	<u> </u>		
Citra, FL 321			
Name and Title:	Name and Title:		
Address	Address:		
Address	Address.		
			
ARTICLE VI REGISTERED AGENT			
The <u>name and Florida street address</u> (P.O. Box		red agent is:	
Name: William J.	Specut		
Name: $\frac{W^{1/4}a^{-1}J}{2729}$ SE $Ocala, F$	48th ace		
neala, F	74680		
- Carry			
ARTICLE VII INCORPORATOR			
The name and address of the incorporator is:	-		
Name: W-11ian J	- Joechy		
Name: William J Address: 2729 SE 4 Ocala, A	18th ave		
Oval A	214450		
	34480		
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 t	(OPTIONAL) han five business days prior or 90 business days	
after the filing.)			
Note: If the date inserted in this block does not document's effective date on the Department of		ling requirements, this date will not be listed as the	
Having been named as registered agent to accordificate, I am familiar with and accept, the app	ept service of process for the a pointment as registered agent ar	bove stated corporation at the place designated in nd agree to act in this capacity	this
B1 / 1	/	9/20/15	
Required Signature of	f Pagistarad Agant		
		Date	
I submit this document and affirm that the facts to the Department of State constitutes a third dep		vare that any false information submitted in a docum 817.155, F.S.	nent
		9/30/15	
Required Signatu	ure of Incorporator	Date	