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DEC 1 5 2015 T CANNON

COVER LETTER

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

Dunedin Council of Organizations 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 REQUIRE								
FROM: Ken Hannon Name (Printed or typed)								
1143 Michigan Blud.								
Dunedin FL 34698 City, State & Zip								
	721-298	7 - 33 20						

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

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

ARTICLE I The name of the	NAME Dunedin Counci corporation shall be:	il of Organizati	ons, Inc. SECRETARY OF STATE TALLAGASSEE, T. ORIDA
ARTICLE II	PRINCIPAL OFFICE		
	Principal <u>street</u> address: 1242 Tayloc Aug.	P. (15 DEC -7 PH 4: 08 Mailing address, if different is: D. Box 180
e magning e e game	Dunedin, FL 3469	g Du	nedin, FL 34697
propriet the state of the state		designation of the second	
ARTICLE III		CO is a politica	ally nonpartisan group which serves as
	which the corporation is organized is: nrough which recognized organize	zations may b	etter promote and serve the welfare of the
community.	The corporation is organized ex	clusively for c	haritable purposes, including, for such
purposes, 1	the making of distributions to org	anizations tha	at qualify as exempt organizations under
section 501	(c)(3) of the Internal Revenue C	ode, or the co	rresponding section of any future federal
tax code.			
ARTICLE IV	MANNER OF ELECTION The n	nanner in which the	directors are elected and appointed:
	in the bylaws of the corporation.		
ARTICLE V	INITIAL OFFICERS AND/OR D	IRECTORS	
Name and Title	Ken Hannon, President	_ Name and Title: _ Address:	Pat Bauer, 1st Vice President
	P.O. Box 180		P. O. Box 180
	Dunedin, FL 34697		Dunedin, FL 34697
	Rebecca Wellborn, Treasurer		Sharon Williams, Secretary
Name and Title	P. O. Box 180	_ Name and Title	
Address	Dunedin, FL 34697	Address:	Dunedin, FL 34697
Name and Title	·	Name and Title	
Address		Address:	***************************************
·		*	

Name and Title:	Na Na	me and Title:	
Address	Ad	idress:	
Name and Title	Na	nme and Title:	
Tranto and 11do		into that Theo	•
Address	Ac	idress:	•
			-
ARTICLE VI The name and Flo	REGISTERED AGENT rida street address (P.O. Box NOT acceptab	ole) of the registered agent is:	
Name:	Rebecca Wellborn	1	
Address:	1242 Taylor Ave.		
	Dunedia, FL 346	, 98	SECR TALLA 15 DE
470000000000000000000000000000000000000	**************************************		- 5 3 3 ·
ARTICLE VII The name and add	INCORPORATOR Iress of the Incorporator is:		7 832
Name:	Ken Hannon		PH L
Address:	1143 Michigan 7 Dunedin FL 346	<u>3/vd</u> .	STATE FLORIC 4: 08
	Dunedin FL 346	98)A
		process for the above stated corporation at the place	designated in this
cernificate, 1 am ja	muar win and accept the appointment as re	egistered agent and agree to act in this capacity ///	1
/r/	Wellen	12/4/	15
	Required Signature of Registered Ag	ent Date	
	ment and affirm that the facts stated herein of of State constitutes a third degree felony as p	are true. I am aware that any false information subm provided for in s.817.155, F.S.	itted in a document
•			1
(D) 14		12/9	<u>/ 'S</u>
	Required Signature of Incorpor	rator Date	1

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