

N160000000786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800280864628

800280864628
01/19/16--01014--024 **87.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 JAN 19 PM 3:04

JAN 19 2016

S. PRATHER

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

SUBJECT: USMVMC Alachua County INC, Corp.
(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: Richard L Murrhee
Name (Printed or typed)

16327 NW 90th St.
Address

Alachua, FL 32615
City, State & Zip

(352) 665-7859
Daytime Telephone number

boomer.murrhee@gmail.com
E-mail address: (to be used for future annual report notification)

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

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

ARTICLE I NAME

The name of the corporation shall be: USMVMC Alachua County INC. Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

16327 NW 90th St.
Alachua, FL 32615

Mailing address, if different is:

P.O. Box 5703
Gainesville, FL 32627

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Support US veteran
Causes.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 JAN 19 PM 3:04

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: officers
are elected by members every 2 years.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rick Murree

Address

President
16327 NW 90th St.
Alachua, FL 32615

Name and Title: Rod Heathman

Address:

Vice President
4716 NW 27th Pl
Gainesville, FL 32606

Name and Title: L.A. Mueller

Address

2522 NW 24th Terr
Newberry, FL 32669
"Treasurer"

Name and Title: Ronald Fort

Address:

Secretary
9946 SW 98th Terr.
Gainesville, FL 32608

Name and Title: _____

Address

Name and Title: _____

Address: _____

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: Rick Murrhee
 Address: 16327 NW 90th St.
Alachua, FL 32615

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Rick Murrhee
 Address: 16327 NW 90th St.
Alachua, FL 32615

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 16 JAN 19 PM 3:04

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

12/24/15
 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

12/24/15
 Date