

N16000001536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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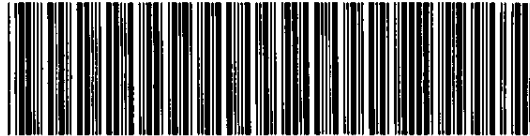
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

02-16-16

7

COVER LETTER

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

SUBJECT: North Florida Officials Association 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: Stephen Stepp

Name (Printed or typed)

848 Westgate Drive

Address

Jacksonville, Florida 32221

City, State & Zip

904-334-8090

Daytime Telephone number

d530m@comcast.net

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: North Florida Officials Association Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1200 McDuff Ave.

Jacksonville, Florida 32205

Mailing address, if different is:

P.O. Box 47826

Jacksonville, Florida 32247

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To carry on the business of the member officials, including but not limited to training, contracting with member schools, and assigning member officials to football contests.

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ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Membership votes

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mike Hayden President

Address 3676 Spinnaker Ct.
Jacksonville, Florida 32277

Name and Title: Thom Pickens Secretary

Address: 2047 Valens Drive
Jacksonville, Florida 32216

Name and Title: John Carpenter Vice President

Address 44178 Caties Way
Callahan, Florida 32011

Name and Title: Stephen Stepp Treasurer

Address: 848 Westgate Drive
Jacksonville, Florida 32221

Name and Title: Talmadge Ford Member At Large

Address 2508 West 23rd. Street
Jacksonville, Florida 32209

Name and Title: Brad Kennington Commissioner

Address: 14970 Venosa Circle
Jacksonville, Florida 32258

Name and Title: Joe Covella Past Pres. Name and Title: _____
Address: 12930 Rivermist way Address: _____
Jacksonville, FL 32224 _____

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: Stephen Stepp
Address: 848 Westgate Drive
Jacksonville, FL 32221

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Stephen Stepp
Address: 848 Westgate Drive
Jacksonville, FL 32221

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

Stephen L Stepp
Required Signature of Registered Agent

2-1-16
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.

Stephen L Stepp
Required Signature of Incorporator

2-1-14
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA