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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/11

COVER LETTER

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

SUBJECT: Miss Florida Azalea Scholarship Pageant Incorporated

(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: Marcia Tracy
Name (Printed or typed)

112 Timberview Dr.
Address

Palatka, FL 32177
City, State & Zip

386-983-3388
Daytime Telephone number

marciatracy@earthlink.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 Miss Florida Azalea Scholarship Pageant *Incorporated*
The name of the corporation shall be:

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ARTICLE II PRINCIPAL OFFICE

Principal street address:
112 Timberview Drive
Palatka, FL 32177

Mailing address, if different is:
112 Timberview Drive
Palatka, FL 32177

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TALLAHASSEE FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To further the education of young woman who meet the requirements stated in the Miss America organization rules and regulations.

To maximize exposure for Putnam County revitalization efforts for the year of there reign.

To be morally and ethically outstanding in all formats of there daily lifes.

To be ready to create sponsorships for there platforms and to further there participation in the Miss America Pageants

To motivate and help young woman realize there goals.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: By Appointment

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Marcia Tracy/President	Name and Title:	Butch Bramlitt/Vice President
Address	112 Timberview Dr. Palatka, FL 32177	Address:	279 Buck Run Way St Augustine, FL 32092

Name and Title:	Tina Duck/Secretary	Name and Title:	
Address	109 Macon Rd. Palatka, FL 32177	Address:	

Name and Title:		Name and Title:	
Address		Address:	

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

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TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Marcia Tracy
Address: 112 Timberview Dr.
Palatka, FL 32177

ARTICLE VII INCORPORATOR

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

Name: Marcia Tracy
Address: 112 Timberview Dr.
Palatka, FL 32177

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: May 1, 2016 (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

Marcia Tracy
Required Signature of Registered Agent

05/02/2016
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.

Marcia Tracy
Required Signature of Incorporator

05/02/2016
Date