

N16 000005763

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

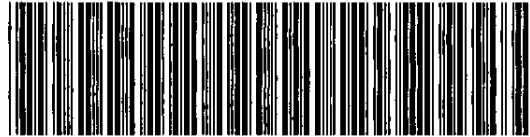
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/17/16--01020--028 **70.00

16 JUN -3 PM 4:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA

R. Culligan JUN -7 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 24, 2016

MARK HOGAN
4210 KENT DRIVE
LARGO, FL 33774

SUBJECT: SPARK INC.
Ref. Number: W16000022016

We have received your document for SPARK INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return 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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 616A00006077

COVER LETTER

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

SUBJECT: ~~Spark Inc.~~ Central Spark 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: Mark Hogan

Name (Printed or typed)

4210 Kent Drive

Address

Largo, FL 33774

City, State & Zip

(727) 223-3924

Daytime Telephone number

mmzghogan@gmail.com

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

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



May 31, 2016

Neysa Culligan
Regulatory Specialist II
FL Division of Corporations
Tallahassee, FL 32314

Dear Ms. Culligan,

Please find enclosed a corrected filing in response to letter number 616A00006077.

Thank you,

A handwritten signature in black ink, appearing to be "E-CB".

Elizabeth C. Barnes, Esq.

146 2nd Street North, Suite 310
St. Petersburg, FL 33701
(727) 201-7403
elizabeth@barneslawfl.com
www.barneslawfl.com

RECEIVED
16 JUN -3 PM 4:00
STATE
TALLAHASSEE, FLORIDA

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

FILED

ARTICLE I NAME

The name of the corporation shall be:

~~Spark Inc.~~ **Central Spark Inc.**

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ARTICLE II PRINCIPAL OFFICE

Principal street address:

4210 Kent Drive

Mailing address, if different is:

Largo, FL 33774

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The organization is organized exclusively for charitable, religious,

educational, or scientific purposes under section 501(c)(3) of the Internal Revenue Code or corresponding section of any future tax

code. Upon dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of section

501(c)(3) of the Internal Revenue Code or corresponding section of any future tax code or shall be distributed to the federal

government or to a state or local government for a public purpose. Specifically this organization seeks to take care of living things

through a variety of methods including but not limited to an accupuncture free clinic and an animal sanctuary.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: According to bylaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mark Hogan - President

Address: 4210 Kent Drive

Largo, FL 33774

Name and Title: Jillian Cartwright - Vice President

Address: 51 Lockwood Ave

Old Greenwich, CT 06870

Name and Title: Margaret Hogan - Treasurer

Address: 4210 Kent Drive

Largo, FL 33774

Name and Title: Gidon Levenbach

Address: 1970 Knolls Drive

Santa Rosa, CA 95405

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: Elizabeth C Barnes Esq
Address: 146 2nd St N, Suite 310
St Petersburg, FL 33701

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Elizabeth C Barnes Esq
Address: 146 2nd St N, Suite 310
St Petersburg, FL 33701

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

S-CB

Required Signature of Registered Agent

3/9/16

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.

S-CB

Required Signature of Incorporator

3/9/16

Date