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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 17, 2016

JOSEPH A. HEINTZ, JR. 750 TAMIAMI TRL., #3 PORT CHARLOTTE, FL 33953

SUBJECT: BLUE BLOOD BROTHERHOOD, INC.

Ref. Number: W16000035768

RECEIVED

We have received your document for BLUE BLOOD BROTHERHOOD, 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):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of 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.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 216A00010366 ~

COVER LETTER

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

Blue Blood Brotherhood, Inc.

941-206-2228

jheintz@jheintzlaw.com

SUBJECT.	(PROPOSED CORPO	RATE NAME - <u>MUST IN</u>	CLUDE SUFFIX)
Enclosed is an original a	and one (1) copy of the Arti	cles of Incorporation and	a check for:
\$70.00	\$78.75	□\$78.75	\$87.50
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,
	Certificate of Status	& Certified Copy	Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	Joseph A. Heintz Jr.		
	Name (Printed or typed)		
	750 Tamiami Trail, #3		
		Address	_
	Port Charlotte, FL 33953		

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

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

City, State & Zip

Daytime Telephone number

ARTICLES OF INCORPORATION

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

ARTICLE I The name of the	NAME Blue Blood Brothe corporation shall be:	rhood, Inc.		하 5종
ARTICLE II	PRINCIPAL OFFICE			a
750 T	Principal <u>street</u> address: amiami Trail, #2A		Mailing address, if different is:	
Port C	Charlotte, FL 33953			5
officers who no	eed financial, health, educational and mo	ral support. To partne		organization
	orcement. To establish media content wh			
	ommunity. To assist and stock law enforce			
•	in the line of duty. The support of any and			itate the behavior
health, education	on and training to assist law enforcement	officers with variou	s issues after retirement.	
bylaws ARTICLE V	MANNER OF ELECTION The man		ctors are elected and appointed:	ovided for in the
Name and Title	James W Browning, President	Name and Title	Matt Noftz, Vice President	
Address	750 Tamiami Trail, #2A	Address:	750 Tamiami Trail, #2A	_
	Port Charlotte, FL 33953		Port Charlotte, FL 33953	-
Name and Title	Don Joseph, Secretary	Name and Title	Duane Coldiron, Treasurer	_
Address 750 Tamiami	750 Tamiami Trail, #2A	Address:	750 Tamiami Trail, #2A	_
	Port Charlotte, FL 33953		Port Charlotte, FL 33953	
Name and Title	×	Name and Title		-
Address		Address:		_
		_		

Name and Title:_		Name and Title:		· · · · · · · · · · · · · · · · · · ·	
Address _		Address:			
_					
Name and Title:_		Name and Title:			
Address _		Address:			
_					
	REGISTERED AGENT Orida street address (P.O. Box NOT accept	table) of the regi	stered agent is:	ن دس	
Name:	Joseph A. Heintz, Jr.			5	
Address:	750 Tamiami Trail, #3			اله مستور مد فرود ۱ مد فرود ۱	1
	Port Charlotte, FL 33953			න දැද්දි න	:' T
	INCORPORATOR ddress of the Incorporator is:			H 2: 40	
Name:	Joseph A. Heintz, Jr.	<u></u>		, ,	
Address:	750 Tamiami Trail, #3				
	Port Charlotte, FL 33953	 			
Effective date, if	EFFECTIVE DATE: other than the date of filing: 5-2- late is listed, the date must be specific and	l b I cannot be moi	(OPTIONAL) re than five business days	s prior or 90 business da	ys
	inserted in this block does not meet the appetive date on the Department of State's recor		filing requirements, this o	tate will not be listed as th	ie
	med as registered agent to accept service of familiar with and accept the appointment as				in this
		7		5-3-16 Date	
	Required Signature of Registered				
I submit this doc to the Departmen	ument and affirm has the facts stated hereint of State constitutes a third degree felony a	n are true. I am is provided for ir		,	rument
	/Required/Signature of Incorp	orator		5/30/2016 Date	