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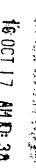
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T. SCOTT



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10/17/16--01012--011 **70.00



COVER LETTER

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

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

\$87.50 **\$78.75** Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

239-597-9227 239-289-2332 Daytime Telephone number

dfey@northcollierfire.com E-mail address: (to be used for future annual report notification)

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

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

ARTICLE I The name of	the corporation shall be: COLLIER COL	WTY FALE MARSHAL'S ASSOCIATION	INC.	
	PRINCIPAL OFFICE	•		
2	Principal <u>street</u> address: 700 HOUSESAGE DQ. N.	Mailing address, if different is:	Mailing address, if different is:	
<u>M</u>	APLES FLORIDA 34104			
The purpose OF FIRE (NTERM WORKING	PREVENTION, PROTECTION AND PETATIONS AND ENFORCEMEN PRENTIONSHIP WITH STATE, PTORS, DEVELOPERS AND END	OFURTHER THE INTEREST AND EFF OF LIFE SAFETY AND TO PROVIDE UNIT OF CONES AND STANDARDS. TO PROMI COUNTY AND LOCAL ALGENCIES, ARCH INTERS. TO PROMOTE PUBLIC FIRE SYDNALS'EDUCATION PROBRAMS. T	TOTE 4 600D HITECTS, PREVENTION	
A compl	CONCUSIVE FIRE OCIDIN AND C	CAUSE INVESTIGATION PROGRAM.		
ARTICLE I	V MANNER OF ELECTION The manner	er in which the directors are elected and appointed: ACTN	E MEMBER	
NOMINA	TO AND ALLEPTED THEN ME	EMBERSHIP VOTES ON THE NOMINEE	<u>s</u>	
ARTICLE V				
Name and T	itle: <u>SHAWN M. HANSON-Peesi oo</u>		8	
Address	2700 HORSESHOE DR. N.	Address:		
	NAPLES, FL. 34104	_		
Name and T	itle: DALE G. FBY, Se VILL PRESIDE	✓TName and Title:	ü	
Address	6495 TAYLOR RD.	Address:	<i># '</i>	
	NARES FL. 34109			
Name and T	itle: <u>Posalet Simmons</u> - Tedasue	∠Walame and Title:		
Address	2800 HORSEYNOE DR. N.	Address:		
	NAPLES FL 34109			

Name and Title:_		Name and Title:		
Address	,	Address:		
-				
Name and Title:_		Name and Title:		
Address		Address:		
_				
	<u>REGISTERED AGENT</u> <u>lorida street address</u> (P.O. Box NO T acc	ceptable) of the registered age	ent is:	
Name:	DALE E. FEY, JR. LAGS TAYLOR RD.	•		
Address:	LAGS TAYLOR RD.			
	NARES FL. 34109			
	<u>INCORPORATOR</u>			
The name and a	ddress of the Incorporator is:			
Name:	DALE E. FEY, SO.			
Address:	6495 TAYLOR RD.			
	NAPLES FL. 34109			
ARTICLE VIII	EFFECTIVE DATE: other than the date of filing:	(07	PMIONIA N	
	date is listed, the date must be specific :			usiness days
	e inserted in this block does not meet the ctive date on the Department of State's re		quirements, this date will not be	listed as the
Having been no.	ned as registered agent to accept service thrilliar with and accept the appointment	e of process for the above s t as registered agent and agr	stated corporation at the place of the ee to act in this capacity	designated in this
NACT	Required Signature of Register		10/12/14	
(,	Required Signature of Register	ed Agent	Date	
	ythent and affirm that the facts stated he ny of State constitutes a third degree felon			ted in a document
	Page 1. Page 1. Required Signature of Inc.		10/11/14 Date	
March 1	Required Signature of Inc	orporator	Date	