

N16000011398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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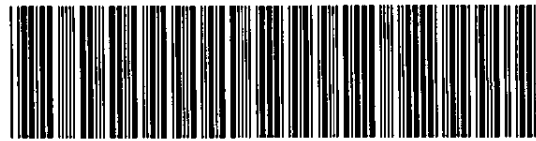
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

V HERRING
NOV 30 2016

COVER LETTER

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

SUBJECT: SAWGRASS VILLAGE COMMUNITY PARK FOUNDATION, 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: JAKE BESTIC

Name (Printed or typed)

240 PONTE VEDRA PARK DR., #201

Address

PONTE VEDRA BEACH, FL 32082

City, State & Zip

904-803-1218

Daytime Telephone number

JAKEBESTIC@HOTMAIL.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 INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: SAWGRASS VILLAGE COMMUNITY PARK FOUNDATION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address:
240 PONTE VEDRA PARK DR., #201
PONTE VEDRA BEACH, FL 32082

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE ORGANIZATION'S PURPOSE IS A COMMUNITY-WIDE FUNDRAISING EFFORT, WITH THE GOAL OF ACCUMULATING THE NECESSARY FUNDS TO PURCHASE A PORTION OF LAND IN PONTE VEDRA BEACH THAT IS BEING OFFERED FOR SALE BY THE OWNER OF A LOCAL DISTRESSED GOLF COURSE. THE PURPOSE OF ACQUIRING THE LAND IS TO TURN THE 27 +/- ACRES INTO A PUBLIC COMMUNITY PARK FOR THE RESIDENTS AND VISITORS OF PONTE VEDRA BEACH TO ENJOY. THE CONTINUED FUNDRAISING EFFORTS WILL ALSO BE USED FOR FUTURE ONGOING PARK MAINTENANCE EXPENSES.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: NOMINATION

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>JAKE BESTIC</u>	Name and Title:	_____
Address	<u>125 OAK VIEW CIRCLE</u>	Address:	_____
	<u>PONTE VEDRA BEACH, FL 32082</u>		_____
	_____		_____
Name and Title:	<u>FRANK LEVENE - DIRECTOR</u>	Name and Title:	_____
Address	<u>TOWER HOUSE, LUDSHOTT MANOR</u>	Address:	_____
	<u>BRAMSHOTT</u>		_____
	<u>HAMPSHIRE, GU30 7RD, UK</u>		_____
Name and Title:	<u>WALT LIPTAK - DIRECTOR</u>	Name and Title:	_____
Address	<u>3205 OLD BARN CT.</u>	Address:	_____
	<u>PONTE VEDRA BEACH, FL 32082</u>		_____
	_____		_____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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2016 NOV 28 AM 7:05

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: United States Corporation Agents, Inc.

Address: 13302 Winding Oak Ct., Ste. A

Tampa Bay, FL 33612

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jake Bestic

Address: 125 Oak View Circle

Ponte Vedra Beach, FL 32082

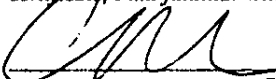
ARTICLE VIII EFFECTIVE DATE: 11/12/2016

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 days prior or 90 days after the filing.)

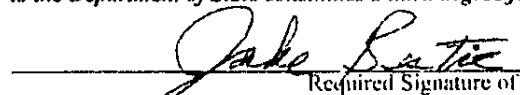
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Cheyenne Moseley, Asst. Secretary on behalf of United States
Corporation Agents, Inc.
Required Signature of Registered Agent

11/18/2016
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.


Required Signature of Incorporator

11/7/2016
Date