## 11600011588

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| Certified Copies   | _ Certificates    | s of Status |
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Office Use Only

M. MOON DEC 02 2016 November 30, 2016

Florida Department of State Division of Corporations Corporate Records, P.O. Box 6327 Tallahassee, Fl. 32314

Letter Number 216A00024250

Dear Mr. Moon:

Please release the he publican Club around Beach name for use to another entity. I have provided the information you requested in article IV.

Apologize for the inconvenience this may have created for you.

If you have any further information that I can provide, do not hesitate to let me know.

Sincerely,

Richard Gosch - Vice President

34 Seabridge Dr

Ormond Beach, Fl 32176

386-316-1212

Enclosure - application with info requesed

16 NEO - 2 PH 5: 2



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 10, 2016

MICHAEL L ALEKSON 2136 JOHN ANDERSON DR ORMOND BEACH, FL 32176

SUBJECT: REPUBLICAN CLUB ORMOND BEACH AREA, INC

Ref. Number: W16000076506

We have received your document for REPUBLICAN CLUB ORMOND BEACH AREA, INC and your check(s) totaling \$78.75. 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is N15000010841.

It appears that the information in article iv is incomplete or cut off. Please provide the complete information.

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.

Matthew T Moon Regulatory Specialist II

Letter Number: 216A00024250

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www.sunbiz.org

Division of Corporations - P.O. ROY 6327 - Tallahasson, Florida 32314

## **COVER LETTER**

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

Republican Club Orword Beach Area Corp. 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** 

\$87.50

& Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Wicksel L. Alekson Name (Printed or typed)

2136 John Awdorson Dr. Address

OrMand Barch F1 32176 City, State & Zip

386 - 846 - 32/3

Davtime Telephone number

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

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

|   | the corporation shall be:   |   |  |  |
|---|---|---|--|--|
| Principal street address: 2136 John Anderson Dr       |   |   | Mailing address, if different is:  |  |
| Orn   | nond Beach, Fl 32176  |   |  |  |
| The purpose   | II PURPOSE for which the corporation is organized i  Onmwynity.   |   |  |  |
|   |   |   |  |  |
| ARTICLE I   | V MANNER OF ELECTION The  | manner in which the dir                                   | ectors are elected and appointed:  | nembers majority v <b>oy</b>   |
|   |   |   | ectors are elected and appointed:  | nembers majority vo  |
| ARTICLE V   | / INITIAL OFFICERS AND/OR DI  |   | Richard Gosch - VP   | 16 SEC   |
| ARTICLE V   | / INITIAL OFFICERS AND/OR DI  | <u>RECTORS</u>  | Richard Gosch - VP   | 16 DEC - 2   |
| ARTICLE V   | / INITIAL OFFICERS AND/OR DIS   | RECTORS  Name and Title                                   | : Richard Gosch - VP   | SECTION PROPERTY OF STANLING TO SECTION AND SECTION AN |
| ARTICLE V<br>Name and T<br>Address                    | itle:  Chuck Collins - President  127 Ocean Aire Ter South  Ormond Beach, Fl 32176  | RECTORS  Name and Title Address:                          | Richard Gosch - VP  34 Seabridge Dr.  Ormond Beach, Fl 32176   | 16 DEP - 2   |
| ARTICLE V Name and T Address Name and T               | itle:  Chuck Collins - President  127 Ocean Aire Ter South  Ormond Beach, Fl 32176  | RECTORS  Name and Title Address:  Name and Title          | Richard Gosch - VP  34 Seabridge Dr.  Ormond Beach, Fl 32176   | SECTION OF STATE   |
| ARTICLE I  ARTICLE I  Name and T  Address  Name and T | itle: Chuck Collins - President  127 Ocean Aire Ter South  Ormond Beach, Fl 32176  Michael Alekson - treasurer                        | RECTORS  Name and Title Address:                          | Richard Gosch - VP  34 Seabridge Dr.  Ormond Beach, Fl 32176  Kris Bartlet - secretary   | SECTION OF STATE   |
| ARTICLE V Name and T Address Name and T Address       | itle: Chuck Collins - President  127 Ocean Aire Ter South  Ormond Beach, Fl 32176  Michael Alekson - treasurer  2136 John Anderson Dr | RECTORS  Name and Title Address:  Name and Title Address: | Richard Gosch - VP  34 Seabridge Dr.  Ormond Beach, Fl 32176  Kris Bartlet - secretary  366 Apache Trail  Ormond Beach, Fl 32174 | 16 DEC -2 PH 5: 22   |

| Name and Title:_      | Name and Title:   |   |
|-----------------------|---|---|
| Address               | Address:  |   |
| · <u>·</u>            |   |   |
| _                     |   |   |
| Name and Title:_      | Name and Title:   |   |
| Address               | Address:  |   |
|                       |   |   |
|                       |   |   |
|                       | REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of the registered agent is:  | SE SE                                   |
| Name:                 | Carmelo (Chuck) Collins   |   |
| Address:              | 127 Ocean Aira Ter. S   |   |
|                       | Ormond Beach, Fl 32176  |   |
| 4 D.T. C. C. L. L. L. | 22  | · • • • • • • • • • • • • • • • • • • • |
|                       | INCORPORATOR  ddress of the Incorporator is:  | -                                       |
| Name:                 | Michael Alelson   |   |
| Address:              | 2136 John Anderson Dr   |   |
|                       | Ormond Beach, Fl 32176  |   |
| ARTICLE VIII          | EFFECTIVE DATE:   |   |
| Effective date, if    | other than the date of filing: (OPTIONAL) date is listed, the date must be specific and cannot be more than five business days prior or 90 bus  | siness days                             |
| Note: If the date     | e inserted in this block does not meet the applicable statutory filing requirements, this date will not be li   | sted as the                             |
| document's effect     | ctive date on the Department of State's records.  |   |
|                       | med as registered agent to accept service of process for the above stated corporation at the place de<br>familiar with and geogri the appointment as registered agent and agree to act in this capacity | signated in th                          |
| certificate, x am j   | 1/10/1  | <i>a.</i> /                             |
|                       | Required Signature of Registered Agent Date   | 1016                                    |
|                       | ument and affirm that the facts stated herein are true. I am aware that any false information submitte  | d in a documei                          |
|                       |   |   |
|                       | Note State constitutes a third degree felony as provided for in s.817.155, F.S.    Colored Signature of Incorporator   Date   | <u>.</u><br>5                           |