

N17000005573

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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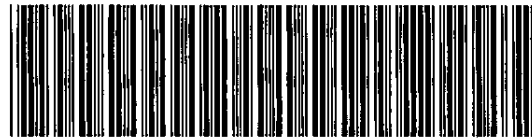
(Business Entity Name)

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FILED
17 MAY 26 AM 8:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

05/26/17

COVER LETTER

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

SUBJECT: Suwannee Valley Heritage Museum, 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: Thomas J. Skierski

Name (Printed or typed)

10556 70th Street

Address

Live Oak, FL 32060

City, State & Zip

386-364-5477 / 386-688-6757

Daytime Telephone number

sloppyjoemeister@gmail.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)

FILED
17 MAY 21 AM 8:59
SECRETARY OF STATE
PALM BEACH COUNTY, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Suwannee Valley Heritage Museum, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
208 Ohio Ave N

Live Oak, Florida 32064

Mailing address, if different is:
10556 70th Street

Live Oak, Florida 32060

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to locate, collect, preserve, record and exhibit archaeological and historical objects and data illustrative of and relating to the history of the City of Live Oak, Suwannee county and the Northern part of the state of Florida. Creating and maintaining a museum, expositions, celebrations and educational programs relating to historical events, achievements of the people, local governments, industry, churches and schools within Suwannee county and its environs. Publish and distribute multimedia of historical and archaeological significance. Cooperate with other groups working on projects with a similar purpose. Acquire objects or data with historical or archaeological significance by gift, grant, loan or purchase for display and education. Develop programs to bring a better understanding and appreciation by the community of its history, art and natural environment.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: elected

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Thomas J. Skierski President

Address: 10556 70th Street

Live Oak, Florida

32060

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ 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: Thomas J Skierski
Address: 10556 70th St
Live Oak, Fl 32060

FILED
17 MAY 24 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Thomas J Skierski
Address: 10556 70th St
Live Oak, Fl 32060

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 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

Thomas J. Skierski
Required Signature of Registered Agent

5/8/2017
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.

Thomas J. Skierski
Required Signature of Incorporator
Thomas J. Skierski

5/8/2017
Date