## N[7 000 011 814

	l
(Requestor's Name	e)
(Address)	
(Address)	
(City/State/Zip/Pho	one #)
(Business Entity N	ame)
(Document Number	
Special Instructions to Filing Officer:	
Office Use (	Pnlv



400305182664

11/02/17~-01030~-001 \*\*70.00

<del>D-OKE</del>EFE

-NOV-2-9-2017

D O'KEEFE

NOV 3 0 2017

W17-882



November 7, 2017

JULIET E LUSHETSKY 3353 LAKE MARGARET DRIVE ORLANDO, FL 32806

SUBJECT: AMERICAN GUILD OF ORGANISTS, CENTRAL FLORIDA

CHAPTER

Ref. Number: W17000088282

We have received your document for AMERICAN GUILD OF ORGANISTS, CENTRAL FLORIDA CHAPTER and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

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.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 317A00022331

## **COVER LETTER**

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

SUBJECT: Central Florida American Build of Organists, Iuc. (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

Status

□\$78.75 Filing Fee \$87.50

Filing Fee & Certificate of

& Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Juliet E. Lushetsky
Name (Printed or Hoed)

3353 Lake Margaret Dr.

Ovlando, Fl. 32806 City, State & Zip

407-556-5467

Daytime Telephone number

E-hail address: (to rejused 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 The name o	I NAME of the corporation shall be:	dval PL Am	erican Gui	ld of Ovaquist:	s, Iuc.	
	II PRINCIPAL OF FICE			, ,		
	Principal <u>street</u> address			Mailing address,	if different is:	•
_4	338 Fast Lyw	ian Ave		<del></del>		
<u>l</u>	viuter Park, FL	32789				
	,					
ARTICLE	III PUR <u>POSE</u>				1	
	e for which the corporation is					<del></del>
histor	rie and evolving	roles, to	provide	a forum of	mutual &	support
and e	education among	organist	s of all 1	iges.		
·				<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	·					
ARTICLE	IV MANNER OF ELECT	 <u>  </u>	in which the dire	ctors are elected and app	ointed: By~[(	aws_
OTICLE	V WT/A OFFICERS	(Nt) (OR DIDECT	n n e			
<u>ARTICLE</u>						
Name and	Title: M. N'Mothy Su	ulth, Dean	Name and Title	:Timothy J.	Haues, Sul	o-Dean
Address	338 Lyman	Ave	Address:	2906 Marks	Street	
	Winter Pank	#L 32789		Orlando, FL	32803	
		<u> </u>				
Name and	Title: KI'M Stoops, S	Registrar	Name and Title	Juliet E. Lu	shetsky, T	veasurer
Address	186 Underhil Orlando, FL	Loop Dr.	Address:	3353 Lake Ma	avgavet Dr.	
	Oulando, A.	32825	•	Oulando, Fl	32806	
Name and	Title: Richard A. Robi	uson Sect	Name and Title	:		<b>b</b>
Address	1921 Hounds	ake Dr.	Address:			
	Winter Park,					· -
	TO LIVE TOWN		<del>.</del>		·	
				· · ·	<u> </u>	- · · · · · · · · · · · · · · · · · · ·

·•						
Name and Title:			Name and Title:			
			Address:			
			. <u>-</u>			
			. <u>-</u>	. <u></u>		
Nome and Title			Name and Title:			•
					•	
Address		<del></del> . "-	Address:			
	<u></u>				<del></del>	
<del></del>						
ARTICLE VI	REGISTERED AGENT		·			
	orida street address (P.C	•	ptable) of the register	red agent is:		•
Name:	Douglas B.					
Address:	6316 Match					
	Orlando, FL	32809			* 5-	mag N
(DTIC) + 1/11	INCORDOR ATOR				4.F	
	INCORPORATOR dress of the Incorporator	is:			-	1
Name:	Juliet E. Lus	hetsky				_)
Address:	3353 Lake Mar	garet Drive	<del></del>			
	Orlando, FL	32806				<u></u>
	EFFECTIVE DATE:					
· ·	other than the date of filinate is listed, the date mu		d cannot be more t	(OPTIONAL) han five days prior or 90	days after th	ie filing.)
	inserted in this block doe ive date on the Departme			ing requirements, this date	will not be li	sted as the
certificate, I am fa	ned as registered agent to militar with and accept the	accept service a	of process for the a s registered agent an	bove stated corporation a ad agree to act in this capa	t the place de: city	signated in this
J	DUNG			10/	25/2017	
	Required Signat	ure of Registered	Agent	<u> </u>	Date	<del></del>
	ment and affirm that the of State constitutes a thi			are that any false informa 817.155. F.S.	tion submitted	l in a document
Challing .	A E PLAN		- x:y	_	/25/2017	7
- pur	Required S	ignature of Incor	porator		Date	<u> </u>

:

1