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2018 FEB 16 PM 2:27
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: The Florida Construction Workforce Consortium, 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: Anna Cam Fentriss
Name (Printed or typed)
1400 Village Square Blvd, Number 3-243
Address
Tallahassee, Florida 32312
City, State & Zip
850-222-2772
Daytime Telephone number
acf@jacfentriss.com
E-mail address: (to be used for future annual report notification)

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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)

ARTICLE I NAME

The name of the corporation shall be: The Florida Construction Workforce Consortium, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
4883 High Grove Road

Tallahassee, Florida 32309

Mailing address, if different is:
1400 Village Square Blvd, Number 3-243

Tallahassee, Florida 32312

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To promote career path options within the construction industry and to
advocate construction employment. To be a single, unified source of information of industry information for
policymakers. To create and maintain a state website for these purposes. To promote and support research into construction
issues.

ARTICLE IV MANNER OF ELECTION

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

Board of Directors

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Peter Dyga, Director

Address: ABC East Coast
3730 Coconut Creek Parkway, Suite 200
Coconut Creek, Florida 33066

Name and Title: Theresa King, Director

Address: FL Building & Construction Trades Ccl
Post Office Box 10888
Tallahassee, Florida 32302

Name and Title: _____

Address: _____

Name and Title: Jim Warren, Director

Address: Asphalt Contractors Assn of Florida
1007 E. DeSoto Park Drive, Ste. 201
Tallahassee, Florida 32301

Name and Title: Kim Bryan, Director

Address: Natl Utility Contractors Assn Florida
1400 Village Square, Nbr. 3-243
Tallahassee, Florida 32312

Name and Title: _____

Address: _____

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TALLAHASSEE, FLORIDA

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: Anna Cam Fentriss

Address: 4883 High Grove Road

Tallahassee, Florida 32309

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Anna Cam Fentriss

Address: 1400 Village Square Blvd, Number 3-243

Tallahassee, Florida 32312

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TALLAHASSEE, FLORIDA

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


Required Signature of Registered Agent

2-16-2018
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

2-16-2018
Date