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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP☐ WAIT

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(Business Entity Name)

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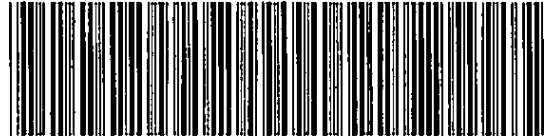
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COVER LETTER

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

SUBJECT: The Gator Dugout Club, 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: Gordon Burleson
Name (Printed or typed)

5331 NW 45th Dr.
Address

Gainesville, Florida 32653
City, State & Zip

352-372-6658
Daytime Telephone number

burleygator@bellsouth.net
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: The Gator Dugout Club, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1630 NW 1st. Ave. Gainesville, FL 32603

Mailing address, if different is:
PO Box 12833, Gainesville, FL 32604

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: as a booster Club for the University of Florida baseball program.

To help increase funds toward an educational scholarship for university baseball players.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: As per by-laws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dorian Lucey, 2018 President

Address: PO Box 12833
Gainesville, FL 32604

Name and Title: Kat Davis, Treasurer

Address: PO Box 12833
Gainesville, FL 32604

Name and Title: Henrietta Logan, President Elect

Address: PO Box 12833
Gainesville, FL 32604

Name and Title: Bob Smithers, Past President

Address: PO Box 12833
Gainesville, FL 32604

Name and Title: Gordon Burleson, Secretary

Address: PO Box 12833
Gainesville, FL 32604

Name and Title: _____

Address: _____

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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: Gordon Burleson
Address: 5331 NW 45th Drive
Gainesville, FL 32653

18 APR 23 PM 3:34
FILED
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Gordon Burleson
Address: 5331 NW 45th Drive
Gainesville, FL 32653

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.

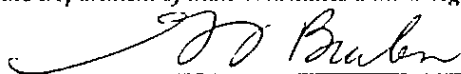


Required Signature of Registered Agent

April 15, 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

April 15, 2018

Date