U130000	
(Requestor's Name) (Address)	
(Address) (City/State/Zip/Phone #)	700314046127
(Business Entity Name)	05.401/1801027010 ++78.75
(Document Number)	
ertified Copies Certificates of Status	<b>ب</b>

K. PAGE JUN 05 2018 FILED 2018 JUN - 1 PH 5: 06

AHASSEE, FLOR

Office Use Only

Special Instructions to Filing Officer:

.

•

## **COVER LETTER**

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

Cameron Bolle Foundation Inc. **SUBJECT:** 

## (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

State State

ADDITIONAL COPY REQUIRED

Wayne C. Mineo FROM:

Name (Printed or typed)

2753 S.R. 580 Suite 206

Address

Clearwater, Fl 33761

City, State & Zip

727712 8883

Daytime Telephone number

Mineolaw@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)

ARTICLE I NAME The name of the corporation shall be: Cameron Bolle Foundation inc.	
ARTICLE II PRINCIPAL OFFICE	
Principal <u>street</u> address: 2753 S. R. 580 Suite 206	Mailing address, if different is:
Clearwater, Fl. 33761	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
organizations within the meaning of Section 501 (c)(3) of the Internal	Revenue Code of 1986 (or the corresponding provisions of any
future United States Internal Revenue code or law) as well as any law	ful purpose as authorized by state law. As well as to include
but not limited to providing adults and minors with training and educ	cation in the safe and effective use of a firearm(s )through
student centered training, and assist excisting programs, like the Boy a	& Girl Scouts of America, Johnnny Appleseed shooter programs
& provide scholrships for firearm training and grants to qualified indi	ividuals for equipment for training and protection.
ARTICLE IV MANNER OF ELECTION The manner in which the manner in wh	he directors are elected and appointed:

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

-

.

,

Name and Title	John Bolle President	Name and Title:		
Address	P.O.Box 893 Dunedin , Fl. 34697	Address:		
	Dunedin, Fl. 34697			
			2018	
Name and Title	John Byrnes Secretary	Name and Title:	2018 JUN	
Address	P.O.BCX 2439	Address:	1	1
	TARPON SPRINGS FL 34689.		70	17) 10
		ORAL E	ប ដ	
Name and Title	Brian Anderson Treasurer	Name and Title:	σ	
Address	P.C.B.Cx 1977			
	Dunilin 11 34697			

Name and Title:		Name and Title:	7	<del>_</del>	
Address	·	Address:			
 Name and Title: Address					
-					
	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT accept Wayne C. Mineo Esq.	able) of the regis	stered agent is:		
Address:	2753 State Road 580 Suite 20	)6		羽に 20	
	Clearwater, Fl 33761 INCORPORATOR dress of the Incorporator is:			2018 JUN - 1 PM 5: 06 SECONDIAR'S OF STATE ALLAHASSEE, FLORAD	
Name:	John Bolle P.O. Box 893			PH 5:06	ì
Address:	Dunedin, Fl. 34697			5. 6	
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

Wring ( Minor Required Signature of Registered Agent

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

<u>5-19-18</u>

<u>5/14/19</u> Date

# **BYLAWS**

# OF

# **Cameron Bolle Foundation Inc.**

# A NON-PROFIT CORPORATION

2018 JUN - 1 PM

<u>و</u> دیا 

### ARTICLE I

### NAME AND OFFICE

**1.01** NAME: The name of this corporation is: Cameron Bolle Foundation Inc.

**1.02 OFFICE:** The principle office of this corporation shall be located at the following address 2753 State Road 580 Suite 206 Clearwater Florida or such other place in or outside the State of Florida as the Directors may deem appropriate.

### **ARTICLE II**

### **PURPOSE**

**2.01 PURPOSE:** Said corporation is organized exclusively for charitable, religious, educational, literary, and scientific purposes, including for such purposes, the making of distributions to organizations that qualify as exempt organizations within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986 (or the corresponding provisions of any future United States Internal Revenue Law), as well as any lawful purpose, as authorized by state law. As well to include but not limited the following; provide adults and minors with training and education in the safe and effective use of firearms through student centered training, assist existing programs, such as the Boy Scouts of America ,Girl Scouts of America, the "Johnny Appleseed" new shooter program and create new firearm training to train the trainers. provide scholarships for firearm training and provide grants to