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| (Ře                     | questor's Name)   |                 |
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| (Add                    | dress)            |                 |
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| (Cit                    | y/State/Zip/Phone | <del>;</del> #) |
| PICK-UP                 | MAIT              | MAIL            |
| (Bu                     | siness Entity Nan | ne)             |
| (Do                     | cument Number)    | <del></del>     |
| Certified Copies        | _ Certificates    | of Status       |
| Special Instructions to | Filing Officer:   |                 |
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SECRETARY OF JIANS TALLAHASSEE, FLOSIDA

## **COVER LETTER**

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

| SUBJECT: Tampa Bay I      | Fencers, Inc.                                |   |               |
|---------------------------|--|---|---------------|
|                           | (PROPOSED CORPO                              | ORATE NAME – <u>MŪST IN</u>                       | CLUDE SUFFIX) |
| Enclosed is an original a | and one (1) copy of the Art                  | icles of Incorporation and                        | a check for : |
| ■ \$70.00<br>Filing Fee   | ☐ \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy  ADDITIONAL CO | & Certificate |
|                           |  | ADDITIONAL CO                                     | A I REQUIRED  |
| FROM:                     | Wendy Kossmann Nar                           | ne (Printed or typed)                             | _             |
|                           | 503 Brooktree Court                          | ·   | _             |
|                           |  | Address   | _             |
|                           | Lutz, FL 33548                               |   |               |
|                           |  | City, State & Zip                                 | _             |

813-389-1946

wendy@headwatersaccounting.com

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

Daytime Telephone number

## ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

| ARTICLE I The name of the                      | NAME Tampa Bay Fence e corporation shall be:   | ers, Inc.             |   |                |         |
|--|--|-----------------------|---|----------------|---------|
| ARTICLE II                                     | PRINCIPAL OFFICE   |                       |   |                |         |
| 503 B  | Principal <u>street</u> address:<br>Brooktree Court  |                       | Mailing address, if different is:   |                |         |
| Lutz,  | FL 33548   |                       |   |                | _       |
| • •  | which the corporation is organized is:   |                       | organized exclusively for charitable, education   | <del>_</del>   | s.<br>– |
| prevention of o                                | cruelty to children or animals under secti   | on 501(c)(3) of the 1 | nternal Revenue Code, or corresponding  | section of any | _       |
| future tax code                                | ÷.   |                       |   |                |         |
|  |  | <u> </u>              |   | . <del>-</del> | _       |
| ARTICLE IV  ARTICLE V  Name and Title  Address | INITIAL OFFICERS AND/OR DIRE   |                       | Matthew Richardson (President)  9178 Fairweather Drive  Largo, FL 33773   | lection per by | _<br>aw |
| ARTICLE V  Name and Title                      | Don Conrad Uy (Chairman)  29404 NE Timmen Road  Vancouver, WA 98642  Terry Abrahams (Vice President) | CTORS  Name and Title | Matthew Richardson (President)  9178 Fairweather Drive  Largo, FL 33773  Raymond Kossmann (Vice President)  503 Brooktree Court  Lutz, FL 33548 | 2018           | - aw    |

|                        | New Port Richey, FL 34655  | Address:  Name and Title | Land O' Lakes, FL 34639                                      |
|------------------------|--|--------------------------|--|
|                        |  | Name and Title           |  |
|                        |  |                          |  |
| -<br>-                 |  | · Address:               |  |
| -                      |  |                          |  |
| -                      |  |                          |  |
|                        |  |                          |  |
| ABELIAN DATE           | DECLARATE AND ADDRESS OF THE PROPERTY OF THE P |                          |  |
|                        | REGISTERED AGENT<br>lorida street address (P.O. Box NOT accep  | ptable) of the regi      | istered agent is:  |
| Name:                  | Raymond Kossmann   | <u> </u>                 |  |
| Address:               | 503 Brooktree Court  |                          |  |
|                        | Lutz, FL 33548   |                          |  |
|                        |  |                          |  |
|                        | INCORPORATOR   |                          |  |
| The <u>name and ac</u> | ddress of the Incorporator is:   |                          |  |
| Name:                  | Wendy Kossmann   |                          |  |
| Address:               | 503 Brooktree Court  |                          |  |
|                        | Lutz, FL 33548   |                          |  |
| ARTICLE VIII           | _EFFECTIVE DATE:   |                          |  |
| Effective date, if     | other than the date of filing:   | id connot be mo          | (OPTIONAL) re than five days prior or 90 days after the fili |
| (ii an checuve u       | ate is instead the date must be specific an  | a cannot be mo           | re than five days prior of 90 days after the fill            |
| Note: If the date      | inserted in this block does not meet the ap  | plicable statutory       | y filing requirements, this date will not be listed a        |
| document's effec       | tive date on the Department of State's reco  | ords.                    |  |
| Havino keen na         | med as registered agent to accept somica   | of process for the       | e above stated corporation at the place designar             |
| certifikate I am f     | familiae with and accept the appointment a   | e rouistored naon        | et and auroo to act in this conacity                         |
| Farm                   | Required Signature of Registered   |                          | 2/8/18   |
| 1                      | Required Signature of Registered   | Agent                    | Date   |
| I submit this doci     | ument and affirm that the facts stated here  | in are true. I am        | aware that any false information submitted in a              |
| /                      | of State constitutes a third degree felony of the State constitutes at third degree felony of the State of Incorporate of Inco |                          |  |

Tampa Bay Fencers, Inc.

Additional article for the Articles of Incorporation shall read as follows:

Article VIII Dissolution Clause: Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.