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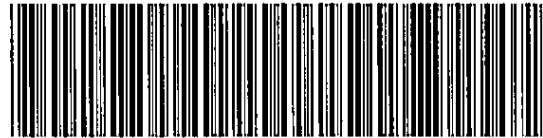
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2018 AUG 10 AM 10:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Florida Chapter of the National Emergency Number Association, 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: Silas Daniel / Marion County Board of County Commissioners

Name (Printed or typed)

2710 East Silver Springs Blvd.

Address

Ocala, Florida 34470

City, State & Zip

352-671-8460

Daytime Telephone number

silas.daniel@marioncountyfl.org

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: Florida Chapter of the National Emergency Number Association, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
Collier County Sheriffs Office

8075 Lely Cultural Blvd. #424

Naples Florida 34113

Mailing address, if different is:
Marion County Board of County Commisioners

2710 East Silver Springs Blvd.

Ocala, FL 34470 Attention: Silas Daniel

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Florida Chapter of the National Emergency Number Association, Inc. is being formed for the purpose of fostering technological advancement, availability and implementation of a universal emergency telephone number system.

To provide support to other 911 agencies engaged in the operation maintenance management of 911 systems. To encourage an atmosphere of mutual cooperation and respect between all entities involved with the provision of 911 services. Promote research, planning, training and ongoing education.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Directors will be elected via electronic ballot by a majority of members pursuant to the by-laws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Laurie Anderson, President

Address: Charlotte County Sherriff's Office

7474 Utilities Road

Punta Gorda Florida 33982

Name and Title: Greg Holcomb, 1st VP

Address: Lake County Public Safety Dept.

PO Box 7800

Tavares, Florida 32778-7800

Name and Title: Dan Koenig, 2nd VP

Address: Department of Public Safety

20 S. Military Trail

West Palm Beach, Florida 33415

Name and Title: Silas Daniel, Secretary

Address: Marion County Board Cty Com

2710 E. Silver Springs Blvd.

Ocala, Florida 34470

Name and Title: Sandi Chernoff, Treasurer

Address: Collier County Sheriff's Office

8075 Lely Cultural Pkwy

Naples, Florida 34113

Name and Title: Mark Whitby, CEFA VP

Address: 1070 Ulmerton Road, Bldg. 1

Suite 343

Largo, Florida 33778

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 AUG 10 AM 10:37

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Name and Title: Michael Fernandez, SOFA VP

Address: Aventura Police Dept.
19200 W. Country Club Dr.
Aventura, FL 33180

Name and Title: Scott Rooney, NOFA VP

Address: Columbia County Combined Communications Center
263 NW Lake City Ave.
Lake City, Florida

Name and Title: Christine Cooper, WEFA VP


Address: Okaloosa County Dept. of Public Safety
90 College Blvd. East
Niceville, Florida 32578

Name and Title: _____

Address: _____

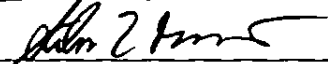
ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:  (SILAS L. DANIEL)
Address: 2710 E. Silver Springs Bv
Ocala, FL 34470

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:  (SILAS L. DANIEL)
Address: 2710 E. Silver Springs Bv
Ocala, FL 34470


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.)

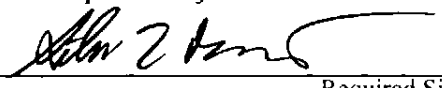
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

8/3/2018
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

8/3/2018
Date