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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

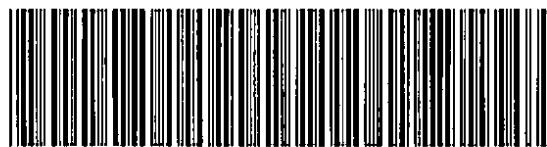
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(Business Entity Name)

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2019 JAN 16 AM 8:42

COVER LETTER

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

SUBJECT: HILLIARD BASEBALL BOOSTER 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: KEVIN T. CRUMP
Name (Printed or typed)

1894 S. 14TH ST. STE 2
Address

FERNANDINA BEACH FL. 32034
City, State & Zip

904-491-6800
Daytime Telephone number

KCRUMP@div-LOG.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: HILLIARD BASEBALL BOOSTER CLUB, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1894 S. 14TH ST. STE 2

Mailing address, if different is:

FERNANDINA BEACH, FL. 32034

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO SUPPORT, ENCOURAGE AND PROMOTE PHYSICAL EDUCATION OF HILLIARD MIDDLE SENIOR HIGH SCHOOL STUDENTS BY RAISING FUNDS FOR BASEBALL EQUIPMENT, SUPPLIES, FIELD MAINTENANCE AND IMPROVEMENT, SPECIAL PROJECTS AND ANY OTHER ITEM DEEMED DESIRABLE BY THE ATHLETIC DIRECTOR AND/OR THE HEAD BASEBALL COACHES.

ARTICLE IV MANNER OF ELECTION

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

CONSENSUS OF MEETING ATTENDEES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LARRY WEST - PRESIDENT Name and Title: KEVIN T. CRUMP - TREASURER

Address: 36675 MIZELL TRAIL RD. Address: 75150 HARVESTER ST.
HILLIARD, FL. 32046 YULEE, FL. 32097

Name and Title: JOE HOBBS - VICE PRESIDENT Name and Title: _____

Address: 1350 MULBERRY LANDING RD. Address: _____
HILLIARD, FL. 32046

Name and Title: MARELLA HUNTER - SECRETARY Name and Title: _____

Address: 361770 PINE STREET Address: _____
HILLIARD, FL. 32046

2013 JAN 16 AM 8:42
HILLIARD, FL. 32046

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: KEVIN T. CRUMP

Address: 1894 S. 14TH ST. STE 2
FERNANDINA BEACH, FL. 32034

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOHN J. GIVENS

Address: 1894 S. 14TH ST. STE 2
FERNANDINA BEACH, FL. 32034

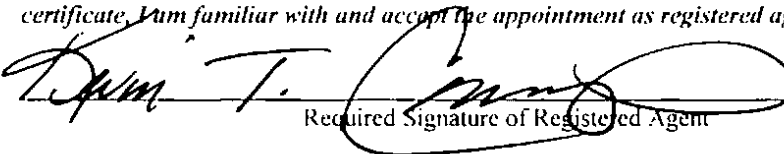
ARTICLE VIII EFFECTIVE DATE:

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.)

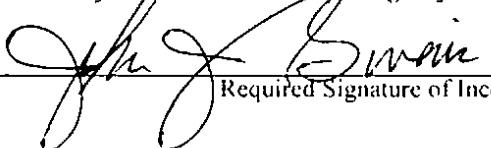
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

1/4/18
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

1/4/18
Date