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2019 AUG 22 AM 11: 22  
SECRETARY OF STATE  
TALLAHASSEE, FL

N CULLIGAN

8/23/19

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

**SUBJECT:** Greyhound Harborage of Central Florida

**(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: Peggy Stastny  
\_\_\_\_\_  
Name (Printed or typed)

5225 Byron Road  
\_\_\_\_\_  
Address

Fruitland Park, FL 34731  
\_\_\_\_\_  
City, State & Zip

(352) 360-0150  
\_\_\_\_\_  
Daytime Telephone number

pakkrattpegg@aol.com

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

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

LC3011M : M  
LC3011C : C  
LC3011Y : Y  
LC3011BK : BK



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 29, 2019

PEGGY STASTNY  
5225 BRYON ROAD  
FRUITLAND PARK, FL 34731

SUBJECT: GREYHOUND HARBORGAGE OF CENTRAL FLORIDA  
Ref. Number: W19000068599

We have received your document for GREYHOUND HARBORGAGE OF CENTRAL FLORIDA and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 619A00015394

FILED

2019 AUG 22 AM 11: 22

SECRETARY OF STATE  
TALLAHASSEE, FL

ARTICLES OF ORGANIZATION  
OF

GREYHOUND HARBORAGE OF CENTRAL FLORIDA, INC.

(hereinafter, "The GHCF Articles of Organization")

(Established June 7, 2019)

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ARTICLE I

NAME

**Section 1.1: Name.** The name of this Corporation, a Florida non-profit corporation, shall be **The Greyhound Harborage of Central Florida, Inc.** (hereinafter, "GHCF").

ARTICLE II

DURATION

**Section 2.1: Duration.** The period of duration for GHCF shall be perpetual, or until such time as the **Board of Directors** (hereinafter, the "**GHCF Board**") shall adopt a resolution recommending that GHCF be dissolved pursuant to the laws of the State of Florida, as well as the laws of the United States of America, especially the laws of the United States Internal Revenue Service for non-profit corporations.

ARTICLE III

PURPOSES

**Section 3.1: Charitable and Educational Purposes.** GHCF is organized exclusively for charitable and educational purposes within the meaning of **Section 501(c)(3) of the Internal Revenue Code of 1986**, or the corresponding provision of any future United States of America Internal Revenue Law (hereinafter, "**501(c)(3)**"). GHCF will engage in activities permissible under **501(c)(3)**.

**Section 3.2: Permissible Activities Included.** These activities will include assistance with shelter, either temporary and/or permanent, as well as food, veterinarian care, transportation, etc. for **Greyhounds** (hereinafter, "**The Greyhounds**") in crisis situations, which have occurred due to physical, medical, and/or financial emergencies on the part of **Greyhound Owners, Greyhound Foster Parent(s), or Greyhound Caregivers** (hereinafter, "**The Greyhound Families**"). Although GHCF is **NOT** being formed as an adoption group, we will assist with adoptions, if needed, for any of **The Greyhounds** for which we are providing assistance.

**Section 3.3: Non-Political Advocating Efforts.** GHCF's activities will include advocating on behalf of **The Greyhounds** and **The Greyhound Families** as needed, **WITHOUT** carrying on propoganda, or otherwise attempting to influence legislation, except as is otherwise provided by **501(c)(3)**. **NO PART** of any activities of the organization will include participating in or intervening in any political campaign on behalf of, or in opposition to, any candidate for public office.

**Section 3.4: Payments of Reasonable Compensation.** GHCF is not organized for profit, and no part of the net earnings of GHCF shall inure to the benefit of any member of the **GHCF Board** or any other individual, except that GHCF may make payments of reasonable compensation for services rendered.

**Section 3.5: No "For Profit" Activities or "For Profit" Funds and / or Assets Management.** GHCF shall never be operated for the primary purpose of carrying on a trade or business for profit, and the monetary funds and / or assets acquired by GHCF will never be managed as such. Notwithstanding any provision of these **GHCF Articles of Organization**, GHCF shall not carry on any activities not permitted to be carried on by an organization exempt from federal income tax under **Section 501(c)(3)**.

#### ARTICLE IV

##### MEMBERS

**Section 4.1: Classes of Membership.** GHCF shall have two classes of members as provided in the **GHCF By-Laws**, the **GHCF Board** and the **GHCF Membership**, and pursuant to the laws of the State of Florida, as well as the laws of the United States of America, especially the laws of the United States Internal Revenue Service for non-profit corporations.

#### ARTICLE V

##### CAPITAL STOCK

**Section 5.1: No Capital Stock.** GHCF shall not have authority to issue capital stock.

#### ARTICLE VI

##### PRINCIPAL STREET ADDRESS AND MAILING ADDRESS OF INITIAL REGISTERED OFFICE, AND NAME AND MAILING ADDRESS OF REGISTERED AGENT

**Section 6.1: Principal Street Address.** The principal street address of the initial Registered Office of GHCF is 5225 Byron Road, Fruitland Park, FL 34731.

**Section 6.2: Name and Mailing Address of Registered Agent.** The name of **GHCF's** initial Registered Agent is Peggy Stastny, and the mailing address of the Registered Agent is 5225 Byron Road, Fruitland Park, FL 34731.

**Section 6.3: Registered Agent Must Reside in the State of Florida.** The Registered Agent listed above must reside in the State of Florida. In the event the Registered Agent listed above moves out of the State of Florida, the **GHCF Board** will appoint a replacement Registered Agent by an affirmative majority vote of the members.

## ARTICLE VII

### AMENDMENTS TO ARTICLES OF ORGANIZATION

**Section 7.1: Right to Amend or Repeal.** **GHCF** reserves the right to amend or repeal any of the provisions contained in these **GHCF Articles of Organization** by an affirmative majority vote of the **GHCF Membership**.

## ARTICLE VIII

### MONETARY FUNDS AND / OR ASSETS

**Section 8.1: Use of Monetary Funds and / or Assets.** **GHCF** shall use its monetary funds and/or assets only to accomplish the purposes stated in the **Articles or Organization**.

**Section 8.2: Distribution of Monetary Funds and / or Assets Upon Dissolution.** When **GHCF** is dissolved, after paying or adequately providing for **GHCF's** debts and obligations, the remaining monetary funds and / or assets shall be distributed in accordance with **Section 501(c)(3)** to one or more charitable organizations by an affirmative majority vote of the **GHCF Membership**, with preference being given to organizations that help greyhounds.

## ARTICLE IX

### DIRECTORS

**Section 9.1: Election or Appointment of GHCF Board.** The **GHCF Board** shall be elected or appointed as provided in the **GHCF By-Laws**.

**Section 9.2: Initial GHCF Board.** The names and addresses of the persons who are to serve as the initial **GHCF Board**, until their successors are elected and qualified are:

#### NAME and TITLE

Peggy Stastny  
Kim Maxwell  
Bernadette Hitchens  
Taresa Williams

#### ADDRESS

5225 Byron Road, Fruitland Park, FL 34731  
18556 NE 5<sup>th</sup> Terrace Road, Citra, FL 32113  
15813 Arabian Way, Montverde, FL 34756  
5225 Byron Road, Fruitland Park, FL 34731

## ARTICLE X

### INCORPORATORS

**Section 10.1: Names and Addresses of GHCF Incorporators.** The names and addresses of the incorporators of GHCF are:

<u>NAME</u>	<u>ADDRESS</u>
Peggy Stastny	5225 Byron Road, Fruitland Park, FL 34731
Kim Maxwell	18556 NE 5 <sup>th</sup> Terrace Road, Citra, FL 32113
Bernadette Hitchens	15813 Arabian Way, Montverde, FL 34756
Taresa Williams	5225 Byron Road, Fruitland Park, FL 34731

## ARTICLE XI

### BY-LAWS

**Section 11.1: Adoption, Amendment, or Repeal of GHCF By-Laws.** The GHCF Board shall have the power to adopt, amend, or repeal the GHCF By-Laws.

**Section 11.2:** The GHCF By-Laws shall govern the operation of GHCF, unless one or more of the GHCF By-Laws conflicts with the GHCF Articles of Organization, in which case the GHCF Articles of Organization shall be controlling and shall prevail.

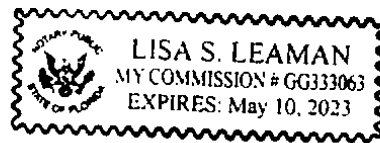
I, Peggy Stastny, hereby state that I am familiar with, and accept, the duties and responsibilities as Registered Agent of **GHCF**.

Peggy Stastny  
Peggy Stastny

I, Lisa S. Leaman, a Notary Public for the State of Florida, hereby certify that on the 9th day of August, 2019:

Peggy Stastny appeared before me and signed the foregoing statement in regards to her duties and responsibilities as Registered Agent of **GHCF**.

Lisa S. Leaman  
Notary Public for the State of Florida  
My Commission Expires: May 10, 2023





I, Lisa S. Leaman, a Notary Public for the State of Florida, hereby certify that on the 9th day of August, 2019:

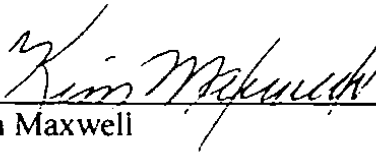
Peggy Stastny  
Peggy Stastny

appeared before me and signed the foregoing document as the **Incorporators of GHCF**, and have sworn that the statements herein are true and correct to the best of their knowledge.

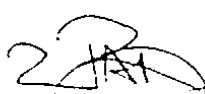
Lisa S. Leaman  
Notary Public for the State of Florida  
My Commission Expires: May 10, 2023

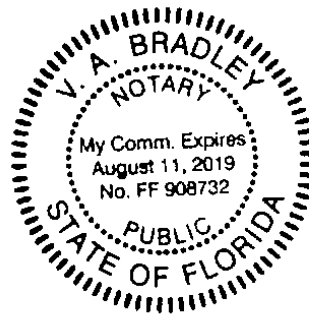


I, V. A. BRADLEY, a Notary Public for the State of Florida, hereby certify that on the 10<sup>th</sup> day of AUGUST, 2019:

  
\_\_\_\_\_  
Kim Maxwell

appeared before me and signed the foregoing document as the **Incorporators of GHCF**, and have sworn that the statements herein are true and correct to the best of their knowledge.

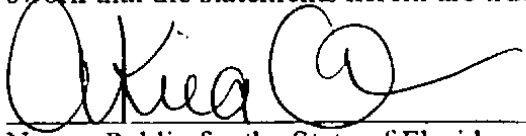
  
\_\_\_\_\_  
Notary-Public for the State of Florida  
My Commission Expires: 08/11/2019



I, AKIEA OVERTON, a Notary Public for the State of Florida, hereby certify that on the 12<sup>th</sup> day of AUGUST, 2019:

  
Bernadette Hitchens

appeared before me and signed the foregoing document as the **Incorporators of GHCF**, and have sworn that the statements herein are true and correct to the best of their knowledge.



Notary Public for the State of Florida

My Commission Expires: 5/9/2021

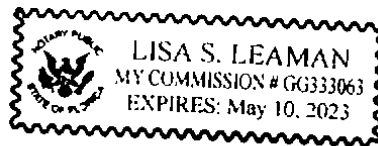


I, Lisa S. Leaman, a Notary Public for the State of Florida, hereby certify that on the 9th day of August, 2019:

Teresa Williams  
Teresa Williams

appeared before me and signed the foregoing document as the **Incorporators of GHCF**, and have sworn that the statements herein are true and correct to the best of their knowledge.

Lisa S. Leaman  
Notary Public for the State of Florida  
My Commission Expires: May 10, 2023



2019 AUG 22 AM 11: 22  
SECRETARY OF STATE  
TALLAHASSEE, FL