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(Re	equestor's Name)	<u></u>
(Address)		
(Address)		
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
	_	

Office Use Only

M 1900 98452

DEC 02 DIA

T. SCOTT

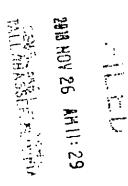
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 7, 2019

GREGORY PARKS 481 WADE DR JACKSONVILLE, FL 32063

SUBJECT: BOLD CITY SCHUTZHUND CLUB

Ref. Number: W19000098452

We have received your document for BOLD CITY SCHUTZHUND CLUB and your check(s) totaling \$78.75. 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.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Division of Com

Letter Number: 019A00023072

Corrected 19 Nov

COVER LETTER

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

Bold City Schutzhund Club Inc SUBJECT:					
	(PROPOSED CORP	ORATE NAME – <u>MUST INC</u>	CLUDE SUFFIX)		
Enclosed is an original c	and one (1) copy of the Ar	ticles of Incorporation and	a check for:		
S70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate PY REQUIRED		
FROM:	Gregory Parks		_		
	Name (Printed or typed)				
481 Wade Dr					
	Address				
	Jacksonville FL 32063				
		City, State & Zip	_		
	904-330-2435				

lair_void@yahoo.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 corporation shall be: Bold City Schut	zhund Club Inc			_
	PRINCIPAL OFFICE				
481 W	Principal <u>street</u> address: fade Drive		Mailing address, if different is:		
	onville FL 32204				
ARTICLE III The purpose for	PURPOSE which the corporation is organized is	to encourage the tra	nining of dogs in working dog sports.		<u>,</u>
	222				
•		· · · · · · · · · · · · · · · · · · ·			
ARTICLE IV	MANNER OF ELECTION The n	nanner in which the di	rectors are elected and appointed: by vote	of membe	ers
					
ARTICLE V _	INITIAL OFFICERS AND/OR DIR	RECTORS			
Name and Title	Gregory Parks, President	Name and Ti	lc:	_	
			8160 Cheryl Ann Lane	_	
			Jacksonville FL 32244	_	
Name and Title	Craig Hillyard, Secretary	Name and Ti	le:	-	
10225 Normandy Cove St	10225 Normandy Cove St	Address:			
			Design	VON RUR	
X1 3 (0%)		Name and Ti	75 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	- 2 26	*
	:			AM 11: 29	(1
Address		Address:	روي تيسي راد الله	- =	2 .

		(
Name and Title:_	· · · · · · · · · · · · · · · · · · ·	Name and Title:
Address _		Address:
_		
Name and Title:		Name and Title:
Address _		
_		
_		
	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acce	ptable) of the registered agent is:
Name:	Gregory Parks	
Address:	481 Wade Dr	
	Jacksonville FL 32204	
	INCORPORATOR Idress of the Incorporator is:	
Name:	Gregory Parks	
Address:	481 Wade Dr	
Address:	Jacksonville FL 32063	
Effective date, if	EFFECTIVE DATE: other than the date of filing:	. (OPTIONAL)
(If an effective d	ate is listed, the date must be specific a	nd 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 a	pplicable statutory filing requirements, this date will not be listed as the
	tive date on the Department of State's rec	
Havine been na	ned as registered agent to accent service	of process for the above stated corporation at the place designated in this
		as registered agent and agree to act in this capacity
	Vanarus Tan	18/11/2019
	Required Signature of Registered	- · · · · · · · · · · · · · · · · · · ·
	iment and affirm that the facts stated her it of State constitutes a third degree felony	ein are true. I am aware that any false information submitted in a document as provided for in A817.155. F.S.
-	Hora ware. I	For 6. 10/11/2019
	Required Signature of Linco	rporator Date
	V /	

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