

# N20000001856

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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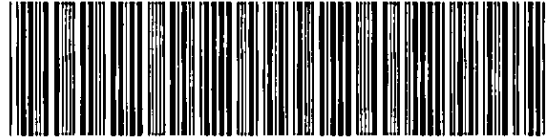
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

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JUL 2 2020



## COVER LETTER

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

SUBJECT: Jacksonville Bourbon & Whiskey Society, 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: John T. Paschall  
Name (Printed or typed)

1267 Lydia CT  
Address

Jacksonville, FL 32205  
City, State & Zip

904.254.2389  
Daytime Telephone number

toddpaschall1965@hotmail.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)

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SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE I NAME**

The name of the corporation shall be: Jacksonville Bourbon & Whiskey Society, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
Jacksonville Bourbon & Whiskey Society, Inc.

Mailing address, if different is:

1267 Lydia CT

Jacksonville, FL 32205

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: This corporation shall be organized and operated exclusively as a social and recreation club within the meaning of § 501 (c) (7) of the Internal Revenue Code of 1986 (as amended), or the corresponding provision of any future United States internal revenue law. The purposes for which this corporation is formed is to promote and stimulate interest in bourbon and whiskey activities, and other activities for the morale, welfare, and benefit of its members and the community.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: \_\_\_\_\_  
The manner in which the directors are elected or appointed is provided in the bylaws of the corporation.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: John T. Paschall - Director

Name and Title: Hillary Lake - Director

Address: 1267 Lydia CT  
Jacksonville, FL 32205

Address: 1267 Lydia CT  
Jacksonville, FL 32205

Name and Title: Charles C. Woodard - Director

Name and Title: \_\_\_\_\_

Address: 1267 Lydia CT  
Jacksonville, FL 32205

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_



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: John Todd Paschall \_\_\_\_\_

Address: 1267 Lydia CT \_\_\_\_\_

Jacksonville, FL 32205 \_\_\_\_\_

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Charles C. Woodard \_\_\_\_\_

Address: 1267 Lydia CT \_\_\_\_\_

Jacksonville, FL 32205 \_\_\_\_\_

**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

6-29-20  
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

6.26.20  
Date



**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Jacksonville Bourbon & Whiskey Society, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal <u>street</u> address: <u>Jacksonville Bourbon &amp; Whiskey Society, Inc.</u> <u>1267 Lydia CT</u> <u>Jacksonville, FL 32205</u>	Mailing address, if different is: _____ _____ _____
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**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: This corporation shall be organized and operated exclusively as a social and recreation club within the meaning of § 501 (c) (7) of the Internal Revenue Code of 1986 (as amended), or the corresponding provision of any future United States internal revenue law. The purposes for which this corporation is formed is to promote and stimulate interest in bourbon and whiskey activities, and other activities for the morale, welfare, and benefit of its members and the community.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: \_\_\_\_\_

The manner in which the directors are elected or appointed is provided in the bylaws of the corporation

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: <u>John T. Paschall - Director</u> Address: <u>1267 Lydia CT</u> <u>Jacksonville, FL 32205</u>	Name and Title: <u>Hillary Lake - Director</u> Address: <u>1267 Lydia CT</u> <u>Jacksonville, FL 32205</u>
Name and Title: <u>Charles C. Woodard - Director</u> Address: <u>1267 Lydia CT</u> <u>Jacksonville, FL 32205</u>	Name and Title: _____ Address: _____ _____
Name and Title: _____ Address: _____ _____	Name and Title: _____ Address: _____ _____



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: John Todd Paschall  
Address: 1267 Lydia CT  
Jacksonville, FL 32205

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Charles C. Woodard  
Address: 1267 Lydia CT  
Jacksonville, FL 32205

**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.

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\_\_\_\_\_  
Required Signature of Registered Agent

6-29-20  
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

6.26.20  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FL

FILED