Page I of 2

Division of Corporations

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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : GARDNER BREWER MARTINEZ-MONFORT, P.A.

Account Number : I20060000058
Phone : (813)221-9600
Fax Number : (813)221-9611

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: rlawson@gbmmlaw.com

FLORIDA PROFIT/NON PROFIT CORPORATION

Suwannee Institute, Incorporated

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COVER LETTER

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

SUBJECT: Suwannee In	stitute, Incorporated					
Enclosed is an original a		ORATE NAME - MUST IN		ATT AHASSE	2021 FEB 12	
□ \$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	☐ \$87.50 Filing Fee, Certified Copy & Certificate	. 7 .	PM 4: 48	

FROM:	Richard Lawson	
	Name (Printed or typed)	
	400 N. Ashley Dr., Ste. 1100	
	Address	
	Tempa, FL 33602	
	City, State & Zip	
	813-221-9600	
	Daytime Telephone number	
	rlawson@gbmmlaw.com	
E	mail address: (to be used for future annual report notification)	

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

(((H21000060775 3)))

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE	L PRINCIPAL OFFICE				
	Principal <u>street</u> address:	Maili	ng address, if different is:		
40	0 N. Ashley Dr., Ste. 1100				
Ta:	mpa, FL 33602			 -	<u> </u>
The purpose	I PURPOSE for which the corporation is organized deducate on issues of public policy. T				
	the individual, and the primacy of the r				
	g and respect for the American democr				e and
	berties set forth in the Bill of Rights.				
ADTICLE IV	MANNER OF FLOOR		Acadi	4L L. 1.	
ARTICLE IV	MANNER OF ELECTION The	manner in which the directors are electe	ed and appointed: As set in	the by-lav	V1.
ARTICLE IY	MANNER OF ELECTION The	manner in which the directors are electe	ы впо арроппест:	-	Vs.
	MANNER OF ELECTION The		ы впо арроппест:	-	V 8.
ARTICLE V	INITIAL OFFICERS AND/OR DIF	RECTORS	an and appointed:	2021 FEB 1	VS.
ARTICLE V	INITIAL OFFICERS AND/OR DIF	RECTORS Name and Title:	A S	2021 FEB 12	
ARTICLE V	INITIAL OFFICERS AND/OR DIE	RECTORS	Solution appointed:	2021 FEB 12 PM	VS.
ARTICLE V	INITIAL OFFICERS AND/OR DIE e; Richard P. Lawson, President e; 400 N. Ashley Dr., Stc. 1100	RECTORS Name and Title:	A S	2021 FEB 12	
ARTICLE V Name and Titl Address	Richard P. Lawson, President 400 N. Ashley Dr., Stc. 1100 Tampa, FL 33602	Name and Title:Address:	A S	2021 FEB 12 PM 4:4	
ARTICLE V Name and Titl Address	Richard P. Lawson, President 400 N. Ashley Dr., Stc. 1100 Tampa, FL 33602	Name and Title:Address:	A S	2021 FEB 12 PM 4:4	
ARTICLE V Name and Titl Address	Richard P. Lawson, President 400 N. Ashley Dr., Stc. 1100 Tampa, FL 33602	Name and Title:Address:Name and Title:	A S	2021 FEB 12 PM 4:4	
ARTICLE V Name and Title Address	Exichard P. Lawson, President 400 N. Ashley Dr., Stc. 1100 Tampa, FL 33602	Name and Title:Address:	A S	2021 FEB 12 PM 4:4	
ARTICLE V Name and Title Address Name and Title	E: Richard P. Lawson, President 400 N. Ashley Dr., Stc. 1100 Tampa, FL 33602	Name and Title:Address:Name and Title:Address:	Solution appointed:	2021 FEB 12 PM 4:4	
ARTICLE V Name and Title Address Name and Title	Exichard P. Lawson, President 400 N. Ashley Dr., Stc. 1100 Tampa, FL 33602	Name and Title:Address:Name and Title:Address:	Solution appointed:	2021 FEB 12 PM 4:4	

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Name and Title	·	Name and Title:			
Address		Address:		_	
-				- -	
Name and Title:		Name and Title:		_	
Address _		Address:		<u>-</u>	
ARTICLE VI The name and F	REGISTERED AGENT orida street address (P.O. Box NOT acc	eptable) of the registered agent is:	₩ :	2021	
Name:	Richard Lawson		III. (T.e	FEB	•;
Address:	400 N. Ashley Dr., Ste. 1100			~	;·
	Tampa, FL 33602	···		- P	1:
The <u>name and ad</u>	INCORPORATOR dress of the Incorporator is: Richard Lawson		(** 1) 7) 7 10 7 10 7	94:48	· · · · · ·
Name: Address:	400 N. Ashley Dr., Ste. 1100	 .			
Address.	Tampa, FL 33602				
Effective date, if o	EFFECTIVE DATE: ther than the date of filing:	. (OPTIONAL)			
Note: If the date i		nd cannot be more than five days prior or 90 pplicable statutory filing requirements, this dat ords.			
laving been name ertificate, I am fai	igual way and agree the appointment as	of process for the above stated corporation a s registered agent and agree to act in this capac	city		d in this
<u>r fjru</u>	Required Signature of Registered	Agent 2	//O/ Date	.21	
submit this doorn se Department of S		n are true I am means that any falce informate	n submitted	in a docu	ement to
Thus	Required Signature of Incorp		/10/	21	
/	Required Signature of Incorp	porator	Date	·	