

N22000013043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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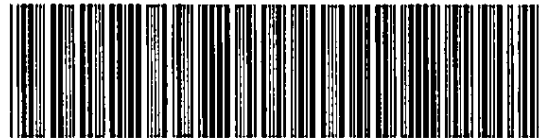
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL 32309
SOLICITOR'S OFFICE

D. O'KEEFE

NOV 22 2022

COVER LETTER

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

SUBJECT: Moccasin Woods Animal Refuge, 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: David Steen

Name (Printed or typed)

8307 SW 152nd Ave

Address

Archer, Florida, 32618

City, State & Zip

334-246-0872

Daytime Telephone number

davidasteen@gmail.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: Moccasin Woods Animal Refuge, Inc.

Article II PRINCIPAL OFFICE

Principal street address:

8307 SW 152nd Avenue
Archer, Florida 32618

Mailing address:

P.O. Box 12422
Gainesville, Florida 32604

Article III PURPOSE

To provide help, homes, or habitats for wild and domestic animals in need of care or attention.

Article IV MANNER OF ELECTION

Directors shall be elected by the members of the Board at an annual meeting, and each director shall be elected for the term of three years and until (a) his/her successor shall be elected, or (b) his/her earlier resignation or removal. The Board of Directors shall, by resolution, determine the method for nominating and electing Directors.

Article V INITIAL OFFICERS AND/OR DIRECTORS

Name and title: David Steen, Executive Director

Address: 8307 SW 152nd Avenue, Archer Florida 32618

Name and title: Amanda Hipps, President

Address: 8307 SW 152nd Avenue, Archer Florida 32618

Name and title: Sean Sterrett, Board Chair

Address: 31 Silvers Rd., Freehold, NJ 07728

Article VI REGISTERED AGENT

David Steen
8307 SW 152nd Ave
Archer, Florida 32618

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FALL ARREST, FLORIDA

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Article VII INCORPORATOR

David Steen
8307 SW 152nd Ave
Archer, Florida 32618

Article VIII

This nonprofit corporation is organized exclusively for charitable, educational and scientific purposes, within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as now enacted or hereafter amended, including, for such purposes: providing homes and habitats for animals.

Article IX

Moccasin Woods Animal Refuge (hereafter MWAR) shall have no shareholders or members. No share of capital stock shall be issued.

Article X

No director, officer or member of the corporation, or any private individual, shall be entitled to share in the distribution of any of the corporate assets upon dissolution of the corporation or the winding up of its affairs. After paying or making provisions for the payment of debts, obligations, liabilities, costs and expenses of the corporation, all remaining assets shall be distributed by the Board of Directors for the identical uses and purposes to any other organization which would then qualify for exemption under the provisions of Section 501(c)(3) of the Internal Revenue Code.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: _____

Address: _____

ARTICLE VII INCORPORATOR

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

Name: _____

Address: _____

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

11/7/22

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

11/7/22

Date

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STATE OF FLORIDA
TALLAHASSEE, FL 0911