

N 23 000 00 8629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

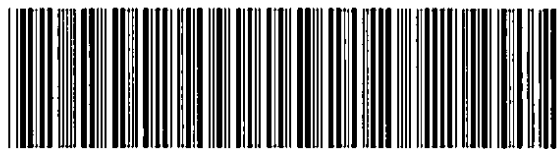
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ALL

2023 JUL 18 PM 2:48

2023 JUL 19 PM 5:45

10/11

COVER LETTER

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

SUBJECT: Martin Luther King Jr. Committee Chiefland Chapter, 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: Lance Hayes
Name (Printed or typed)

7951 NW 147 Place
Address

Trenton, Fl. 32693
City, State & Zip

(352) 672-2879
Daytime Telephone number

Lance Hayes 88@gmail.com
E-mail address: (to be used for future annual report notification)

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

I have NO INTENTIONS IN REINSTATING Doc # N210000093

7/18/2023

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

ARTICLE I NAME

The name of the corporation shall be: Martin Luther King Jr. Committee Chiefland Chapter, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

7951 NW 147 Place

Trenton, Fl. 32693

Mailing address, if different is:

P.O. Box 1642

Chiefland, Fl. 32644

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To raise Money, in order to provide funding for Scholarships for graduating high school students.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: DIRECTORS ARE ELECTED AMONG THE MEMBERS OF THE COMMITTEE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lance Hayes Name and Title: Minnie Hayes

Address: P.O. Box 1964 Address: 121 SW 17th Ave.

Chiefland, Fl. 32644
(Chairman)

Chiefland, Fl. 32626
(Historian)

Name and Title: Almaire Sheppard Name and Title: Johnnie Phillips

Address: 7951 NW 147 Place Address: 1503 SW. 2nd Court.

Trenton, Fl. 32693
(Treasurer)

Chiefland, Fl. 32626
(Treasurer)

Name and Title: Barbara Gamble Name and Title: _____

Address: P.O. Box 330 Address: _____

Chiefland, Fl. 32644
(Secretary)

2023 JAN 10 PM 5:45

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: Lance Hayes

Address: 121 SW 17th Ave.
Chiefland, Fl. 32626

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Address:

Almaire Sheppard
7951 NW 147 Place
Trenton, Fl. 32693

** Important **
** Please send all*
Mail to: P.O. Box
1642
Chiefland, Fl
3264

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

7/15/2023
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.

Almaire Sheppard
Required Signature of Incorporator

07-15-2023
Date

FILED
JUL 16 2023
5:45 PM
TALLAHASSEE, FL