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ALLIANCE

COVER LETTER

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

National Society of the Daughters of the American Revolution, Rainbow river Chapter 3138-FL, INC

SUBJECT: _____
(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

Mary Coogan Stimson
FROM: _____
Name (Printed or typed)
8080 SW 108th Loop

Address
Ocala, Florida 34481

City, State & Zip
315-345-3369

Daytime Telephone number
MCSRN44@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)

National Society of the Daughters of the American Revolution, Rainbow River Chapter 3138-FL, INC

ARTICLE I NAME

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address:
8080 SW 108th Loop

Ocala, FL 34481

Mailing address, if different is:

ARTICLE III PURPOSE

to promote the objectives of the National Society of the Daughters the

The purpose for which the corporation is organized is: _____
American Revolution or NSDAR, to perpetuate the memory and spirit of men and women who achieved American Independence,

by the acquisition and protection of historical spots and the erection of monuments; by the encouragement of historical research in

relation to the Revolution and the publication of it's results; by the preservation of documents and relics; and of the records of the

individual services of Revolutionary soldiers and patriots; and by the promotion of celebrations of all patriotic anniversaries; to

promote institutions for general diffusions of knowledge; to cherish, maintain, and extend the institutions of American freedom; to

foster true patriotism and love of country, and to aid in securing for mankind all the blessings of liberty.

either ballot or voice

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mary Coogan Stimson, Regent

Address: 8080 SW 108th Loop

Ocala

Florida 34481

Name and Title: Deborah Baker, Treasurer

Address: 8968 SW 98th Avenue

Ocala

Florida 34481

Name and Title: Priscilla Brandlehner, Historian/Librarian

Address: 9556 SW 76th Street

Ocala

Florida 34481

K. Elisabeth Strachovsky, Vice Regent

Name and Title: 13930 SE 95th Court

Address: Summerfield

Florida 34491

Name and Title: Constance Bornemann, Chaplain

Address: 8490 SW 136th Terrace

Dunnellon

Florida 34432

Name and Title: Carol Briant, Registrar

Address: 12854 W Highway 328

Ocala

Florida 34482

Rosalind Simpson, Recording Secretary

Name and Title: _____ Name and Title: _____
Address: 9829 SW 72nd Lane _____
Ocala _____
Florida 34481 _____

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: Mary Coogan Stimson
Address: 8080 SW 108th Loop
Ocala, Florida 34481

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CLERK OF COURT

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Mary Coogan Stimson
Address: 8080 SW 108th Loop
Ocala, Florida 34481

ARTICLE VIII EFFECTIVE DATE: January 1, 2024

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

Mary Coogan Stimson
Required Signature of Registered Agent

11/25/2023
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.

Mary Coogan Stimson
Required Signature of Incorporator

11/25/2023
Date