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## COVER LETTER

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

**SUBJECT:** South Bay Academy, 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:** Robert W. Bivins  
\_\_\_\_\_  
Name (Printed or typed)

1060 Bloomingdale Ave.  
\_\_\_\_\_  
Address

Valrico, FL 33596  
\_\_\_\_\_  
City, State & Zip

(813) 643-4900  
\_\_\_\_\_  
Daytime Telephone number

bbivins@bhpalaw.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: South Bay Academy, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

13498 U.S. Hwy 301 S.

Riverview FL 33578

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

This corporation is organized exclusively for charitable, religious, educational, and scientific purposes,

including, for such purposes, the making of distributions to organizations that qualify as exempt organizations described

under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of

Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be

distributed to the federal government, or to a state or local government, for a public purpose.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: As provided for in the Bylaws.

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

Name and Title: Dr. David Speicher, D.P

Address: 13498 U.S. Hwy 301 S.

Riverview FL 33578

Name and Title: Christopher Pello, D.VP

Address: 13498 U.S. Hwy 301 S.

Riverview FL 33578

Name and Title: Karen Speicher, D.S

Address: 13498 U.S. Hwy 301 S.

Riverview FL 33578

Name and Title: Bernadette Pello, D

Address: 13498 U.S. Hwy 301 S.

Riverview FL 33578

Name and Title: Sean Doherty, D.T

Address: 13498 U.S. Hwy 301 S.

Riverview FL 33578

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

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

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FL

FILED

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

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

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\_\_\_\_\_

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: Robert W. Bivins \_\_\_\_\_

Address: 1060 Bloomingdale Ave. \_\_\_\_\_

Valrico, FL 33596 \_\_\_\_\_

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Robert W. Bivins \_\_\_\_\_

Address: 1060 Bloomingdale Ave. \_\_\_\_\_

Valrico, FL 33596 \_\_\_\_\_

**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

10/25/24  
\_\_\_\_\_  
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

10/25/24  
\_\_\_\_\_  
Date

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OF FL