

N96000003697

TRANSMITTAL LETTER

FILED

96 JUL 15 PM 1:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: HILLSBOROUGH RIVER RIDERS, 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

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: SANDY FAIL - TREASURER
Name (Printed or typed)

P. O. BOX 24444

Address

TAMPA, FL 33623

City, State & Zip

(813) 288-4013

Daytime Telephone number

400001882414
-07/02/95--01155--014
****122.50 ****122.50

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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

July 8, 1996

SANDY FAIL
P O BOX 24444
TAMPA, FL 33623

SUBJECT: HILLSBOROUGH RIVER RIDERS, INC.
Ref. Number: W96000014175

We have received your document for HILLSBOROUGH RIVER RIDERS, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6915.

Pamela Hall
Document Specialist

Letter Number: 896A00033092

*My work number is (813) 288-4013 - ask
for "Sena" Fail, or (813) 288-4000 if
busy or unanswered.*

Thank you for your prompt handling.

ARTICLES OF INCORPORATION

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

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96 JUL 15 PM 4:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

Name

The name of the corporation shall be:

HILLSBOROUGH RIVER RIDERS, INC.

ARTICLE II

Principal place of business and mailing address

The principal place of business and mailing address of this corporation shall be:

MEETINGS: SHONEY'S
1031 FOWLER AVE
TAMPA, FL

MAILING: Hillsborough River Riders
P. O. BOX 16102
TAMPA, FL 33687

ARTICLE III

Purpose(s)

The specific purpose(s) for which the corporation is organized is(are):

The primary objective of this corporation shall be to support and promote the Homicide Survivors Support Group of Hillsborough County, Florida, The John W. Bakas Equestrian Center of Hillsborough County, Florida and any other organization approved by the members.

ARTICLE IV

Manner of election of directors

The manner in which the directors are elected or appointed is as follows:

The directors of this organization shall be elected by a majority of the general membership present. Directors shall be elected at the annual meeting and shall serve a one (1) year term.

ARTICLE V

Limitation of corporate powers

The corporate powers of this corporation are as provided in section 617.012 Florida Statutes, unless limited are as follows:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI

Initial registered agent and street address

The name and the street address of the initial registered agent is:

DAVID MIDDLETON
8832 HIGHWAY 301 SOUTH
RIVERVIEW, FL 33569

ARTICLE VII

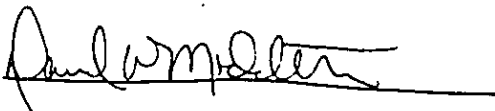
Incorporators

The name(s) and the street address(es) of the incorporator(s) for these articles of incorporation is(are):

DAVID MIDDLETON
8832 HIGHWAY 301 SOUTH
RIVERVIEW, FL 33569

The undersigned incorporator has executed these Articles of Incorporation this 24th day of June, 19 96.

Signature of Incorporator:



DAVID W MIDDLETON

Typed name of incorporator signing

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

HILLSBOROUGH RIVER RIDERS, INC.

(must include suffix)

2. The name and address of the registered agent and office is:

DAVID MIDDLETON

(NAME)

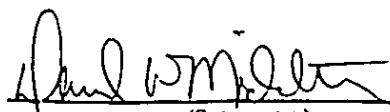
8832 HIGHWAY 301 SOUTH

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

RIVERVIEW, FL 33569

(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(SIGNATURE)

June 24, 1996

(DATE)