

TRANSMITTAL LETTER

COMPTROLLER  
Department of State  
Division of Corporations  
P. O. Box 6927  
Tallahassee, FL 32314

SUBJECT: SUWANNEE COUNTY SHERIFFS MOUNTED POSSE INC  
(Proposed corporate name - must include suffix)

100001982161--9  
-10/22/96--01029--002  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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: SUWANNEE COUNTY SHERIFFS MOUNTED POSSE  
Name (Printed or typed)

4026 CR 249

Address

LIVE OAK FL 32060

City, State & Zip

904-842-2543

Daytime Telephone number

FILED  
96 OCT 21 AM 8:07  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

10/24  
096A-49134

## ARTICLES OF INCORPORATION

The undersigned acting as incorporators of a corporation pursuant to chapter 617, Florida Statutes, adopts the following Articles of Incorporation:

### ARTICLE I Name

The name of the corporation shall be:  
Suwannee County Sheriffs Mounted Posse INC

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### ARTICLE II Principal place of business and mailing address

The principal place of business of this corporation shall be the Suwannee County Sheriffs Department and the mailing address shall be 4026 CR 249, Live Oak, Florida 32060.

### ARTICLE III Purposes

The specific purposes for which the corporation is organized are 1) to assist the Suwannee County Sheriffs Department in any emergency so ordered by the Sheriff or Deputy Sheriff of the Sheriffs Department at that time, 2) to assist the Suwannee County Sheriffs Department in search and finds and 3) to provide security work at certain functions.

### ARTICLE IV Manner of election of directors.

The officers and directors are elected according to the By-Laws which states that all officers are nominated from the floor with election cast by secret ballot.

### ARTICLE V Limitation of corporate powers

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes.

ARTICLE VI

Initial registered agent and street address

The name and address of the initial registered agent is:

William E Warner  
4026 CR 249  
Live Oak, Florida 32060

ARTICLE VII

Incorporators

1. The names and street addresses of the incorporators for these articles of incorporation are:

President - Govan Knight  
16069 165th Road  
Live Oak, Fl. 32060

Vice-President - William E Warner  
4026 CR 249  
Live Oak, Fl. 32060

Secretary/Treasurer - Bernice Green  
20532 68th Street  
Live Oak, Fl. 32060

Sergeant-At-Arms - Hubert Allen Smith, Jr  
16512 CR 136  
Live Oak, Fl. 32060

Liaison Officer - Jeff Cameron  
5098 CR 795  
Live Oak, Fl. 32060

2. This corporation is organized under a non-stock basis.

3. In the event of dissolution, the residual assets of the corporation will be turned over to one or more organizations which themselves are exempt as organizations described in Section 501 (c) (3) of the Internal Revenue Code.

The undersigned incorporator, personally known to me, has executed these Articles of Incorporation. IN WITNESS WHEREOF, I have hereunto set my hand and seal this 18th day of OCTOBER, 1996.

Lolita S. Himes  
(Notary Public)

My commission expires:

Signature of Incorporator:

William E Warner

LOLITA S. HIMES  
Notary Public, State of Florida  
My Comm. expires Aug. 15, 2000  
Comm. No. CC 577696

William E Warner

**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:

SUWANNEE COUNTY SHERIFFS MOUNTED POSSE INC

(must include suffix)

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

WILLIAM E WARNER

(NAME)

4026 CR 249

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

LIVE OAK FL 32060

(CITY/STATE/ZIP)

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*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.*

William E Warner

(SIGNATURE)

10/18/96

(DATE)