

FILED
98 NOV 23 AM 10:41
U.S. DISTRICT COURT
SOUTHERD DISTRICT OF FLORIDA
TALLAHASSEE, FLORIDA

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

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-11/23/98--01114--015
*****70.00 *****70.00

ADDITIONAL COPY REQUIRED

CB
11-30-94
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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

NOON OPTIMIST CLUB OF OLDSMAR, INC.

ARTICLE II PRINCIPAL OFFICE

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

P.O. BOX 325, OLDSMAR, FLORIDA

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are): To work with the youth of the community, and to help in community and civic affairs, promote respect for law, and promote an optimistic outlook on life. To be a vital part of the community of Oldsmar, and Pinellas County.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

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

The Directors shall be elected each year by the membership of the organization. A Majority is needed for election to the board.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Donald D. Klinger, 200 Michaels Circle, Oldsmar, Florida 34677

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

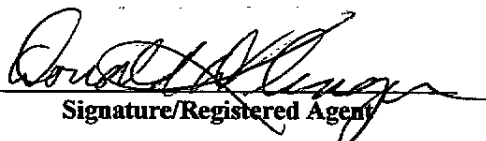
Donald D. Klinger, 200 Michaels Circle, Oldsmar, Florida, 34677


Signature/Incorporator

November 17, 1998
Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

November 17, 1998
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA