(Re	questor's Name)	
(Ad	ldress)	
	dress)	
(10	urocoy	
(Cit	ty/State/Zip/Phone	; #)
		MAIL
(Bu	siness Entity Nam	ne)
(Dc	cument Number)	
	,	
Certified Copies	_ Certificates	of Status
·		<u></u>
Special Instructions to	Filing Officer:	

Office Use Only

W15-32728



05/04/15--01045--006 \*\*78.75



× 06/10/15



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 8, 2015

, V

JULIE BAKER 1816 S. VOLUSIA AVE. ORANGE CITY, FL 32763

SUBJECT: ORANGE CITY MERCHANTS ASSOCIATION, INC. Ref. Number: W15000032728

We have received your document for ORANGE CITY MERCHANTS ASSOCIATION, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears from the information provided that the wrong FORM was filled out. Enclosed you will find the proper FORMS to form a NON-PROFIT Entity, if that is your choice.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

Please return the corrected original and one copy of 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 (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 715A00009650

### **COVER LETTER**

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

#### ORANGE CITY MECHANTS ASSOCIATION, INC. A FOR-PROFIT CORPORATION SUBJECT: (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

□ \$70.00 Filing Fee

**Filing Fee** & Certificate of Status

**\$78.75** 

**3** \$78.75 Filing Fee & Certified Copy

**\$87.50** Filing Fee, Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

FROM: JULIE BAKER

Name (Printed or typed)

# 1816 S. VOLUSIA AVE

Address

# ORANGE CITY, FLORIDA 32763

City, State & Zip

## 386-775-6406

Daytime Telephone number

## JBAKER3956@AOL.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 INCO	l/or Chapter 621, I		
	Tion shall be:		ON, INC. A CORPORATION	
<u>ARTICLE II PRI</u>	<b>NCIPAL OFFICE</b> Principal <u>street</u> address		Mailing address, if different is:	
1816 SOUTH	VOLUSIA AVE			
ORANGE CI	TY, FLORIDA 32763	<del></del>		
•			· · · · · · · · · · · · · · · · · · ·	
<b>ARTICLE III PUR</b> The purpose for which t	<b>POSE</b> a for profit he corporation is organized is:	corporation pro	oviding association member services	
			· · · · · · · · · · · · · · · · · · ·	
•	·····		15	tr.
	U <sup>A</sup> - Marcan	· · · · · · · · · · · · · · · · · · ·		ECRE
N9				
	<u> </u>			<u>.</u>
ARTICLE IV SHA	IRES 100		0 :01 NARC	5 5
ARTICLE IV SHA The number of shares of	stock is:		Û Î	
	TIAL OFFICERS AND/OR DIRECTOR			
Name and Title	"Dick Darling, president	_ Name and Title	Julie Baker, V.President	
Address	1995 N Volusia Ave	Address:	1816 S. Volusia Ave	
	Orange City, FL 32763	_	Orange City, FI, 32763	
		-		
Name and Title	Chris Adkins, secretary	_ Name and Title	Chris Adkins, Treasurer	
Address	272 Hazel Tine Drive	_ Address:	272 Hazel Tine Drive	
	Debary, Florida 32713	_	Debary, Florida 32713	
	·· ·· ·· ·· ··	_		
Name and Title	<u>.                                    </u>	_ Name and Title	:	
Address		_ Address:		
		_		
		_		

13 A	1 V M		
Name and \ Address	d Title:		
ARTICLE VI The <u>name and Fl</u>	<b>REGISTERED AGENT</b> orida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Dick Darling, president		
Address:	1995 N Volusia Ave		_
	Orange City, FL 32763		VISION
<u>ARTICLE VII</u>	INCORPORATOR		
The <u>name and ac</u>	Idress of the Incorporator is:		4H 10:
Name:	Julie Baker		: 06
	1816 S. Volusia Ave		
Address:	Orange City, Florida 32763		

Required Signature/Registered Agen

<u>4-24-2015</u> Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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/Incorporator

24 Ape 2015 Date