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Certified Copies _		_ Certificates	of Status
Special instructi	ons to	Filing Officer:	
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COVER LETTER

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

_{ивјест:} Suwannee Outdoor St	upplies, Inc.
(PROPOSED CORPORA	ATE NAME – <u>MUST INCLUDE SUFFIX</u>)
inclosed are an original and one (1) copy of the art	icles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: Angela M. Rode	e (Printed or typed)
14085 County Road 13	7 Address
Wellborn, FL 32094 City,	, State & Zip
386-365-0170	Telephone number
sosrode@aol.com E-mail address: (to be use	ed for future annual report notification)

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit ARTICLE I NAME Suwannee Outdoor Supplies, Inc. The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE Principal street address 14085 County Road 137 Wellborn, FL 32094 ARTICLE III PURPOSE The purpose for which the corporation is organized is: To conduct all and any business activity that is legal in the state of Florida and the United States specifically but not limited to the wholesale of nondurable goods. ARTICLE IV SHARES The number of shares of stock is:100 common INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Angela M Rode, D/Pres/Sec/Treas Name and Title: Address: Address: 14085 County Road 137 Wellborn FL 32094 Name and Title:____ Name and Title:_ Address: Address: Name and Title: _____ Name and Title:____ Address: Address: REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: <u>Angela M Rode</u> 14085 County Road 137 Address: Wellborn FL 32094 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Angela M.Rode Address: 14085 County Road 137 Weliborn, FL 32094 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 2011 Required Signature/Registered Agent Angelo W. Rode 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 ngela M. Rode