

PO3000076469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

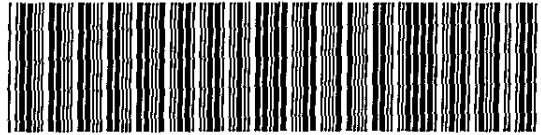
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000021103360

07/07/03--01069--005 **87.50

FILED
03 JUL - 7 AM 9:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/14

SANFORD M. ESTROFF

ATTORNEY AT LAW

4335 Highland Park Boulevard, Suite 3
Lakeland, FL 33813-1671

Post Office Box 5245
Lakeland, Florida 33807-5245

July 3, 2003

Telephone
(863) 646-4900
Fax (863) 644-1499

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

RE: HARGRAVES & ASSOCIATES, INC.

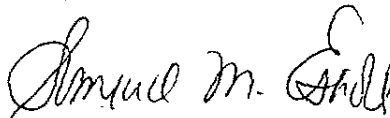
Dear Sirs:

Enclosed please find the original and one copy of the Articles of Incorporation for the above corporation. I would appreciate your assistance with obtaining the corporate charter.

You will find enclosed my check in the amount of \$87.50 to cover the filing fees, Designation of Registered Agent, certified copy, and certificate under seal.

Thank you for your prompt and courteous attention to this request.

Very truly yours,



Sanford M. Estroff

SME/lis

Enclosure: Articles of Incorporation (original + 1 copy)
check for \$87.50

FILED

03 JUL -7 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
HARGRAVES & ASSOCIATES, INC.

The undersigned subscriber to these Articles of Incorporation hereby forms a corporation under the laws of the State of Florida.

ARTICLE I
NAME

The name of this Corporation shall be:

HARGRAVES & ASSOCIATES, INC.

ARTICLE II
PURPOSE

The corporation is organized for the purpose of transacting any or all lawful business.

ARTICLE III
CAPITAL STOCK

The corporation is authorized to issue 1000 shares at \$1.00 par value stock.

ARTICLE IV
PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class, or series as that which he or she already holds, shall have the right to purchase his or her pro rata share thereof (as nearly as may be done without the issuance of fractional shares) at the price at which it is offered to others.

**ARTICLE V
INITIAL REGISTERED
OFFICER AND AGENT**

The street address of the principal place of business of this corporation is 2940 Swindell Road, Lakeland, FL 33802 and the name and address of the initial registered agent of this corporation is JUNE H. HARGRAVES, 2940 Swindell Road, Lakeland, FL 33802.

**ARTICLE VI
INITIAL BOARD OF DIRECTORS**

This corporation shall have one (2) Directors initially. The number of Directors may be increased or decreased from time to time by the By-Laws, but shall never be less than one. The names and addresses of the initial Directors of this Corporation is:

JUNE H. HARGRAVES
2940 Swindell Road
Lakeland, FL 33802


ANTHONY HARGRAVES
2940 Swindell Road
Lakeland, FL 33802

**ARTICLE VII
INCORPORATOR**

The names and addresses of the incorporators are:

JUNE H. HARGRAVES
2940 Swindell Road
Lakeland, FL 33802

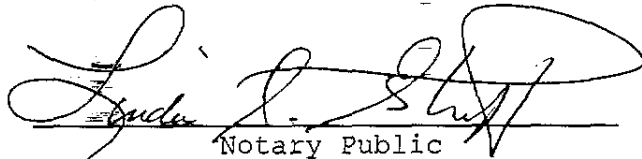
IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation, this 3rd day of July, 2003.


JUNE H. HARGRAVES

STATE OF FLORIDA)
COUNTY OF POLK)

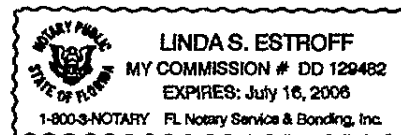
BEFORE ME, the undersigned authority, personally appeared JUNE H. HARGRAVES known to me and known by me to be the person who executed the foregoing Articles of Incorporation and she acknowledged before me that she executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 3rd day of July, 2003.



Notary Public

Notary Name, Commission Number &
Expiration Date



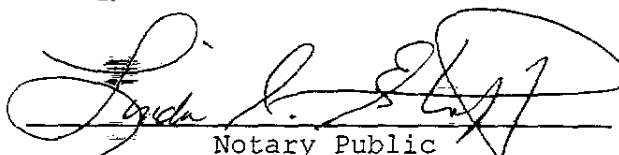
ACCEPTANCE OF DESIGNATION OF REGISTERED AGENT

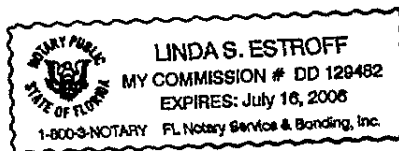
STATE OF FLORIDA)
COUNTY OF POLK)

BEFORE ME, the undersigned authority, personally appeared, JUNE H. HARGRAVES, known to me and known by me to be the person who accepted her designation as Registered Agent on behalf of HARGRAVES & ASSOCIATES, INC., and she acknowledged before me that she executed that Acceptance of Designation of Registered Agent freely and voluntarily.


JUNE H. HARGRAVES

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 3rd day of July, 2003.


Notary Public
Notary Name, Commission Number &
Expiration Date



03 JUL -7 AM 9:53
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA