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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

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

SUBJECT: <u>Jubilee Farm Therapeutic Riding. Inc.</u>
(PROPOSED CORPORATE NAME - <u>MUST INCLUDE SUFFIX</u>)

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

\$70.00

□ \$78.75 Filing Fee Filing Fee &

Certificate of Status

□\$78.75

3 \$87.50

Filing Fee & Certified Copy Filing Fee,

Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

Joy Logan Name (Printed or typed)

> 3791 Salem Rd Address

(850)488-5785 Daytime Telephone number

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

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ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

Jubilee Farm Therapeutic Riding, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3791 Salem Rd. Havana, FL 32333

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Promote the benefits of the horse for people with disabilities. Provide opportunities for individuals to participate in horse back riding, driving, horsemanship and other related activities.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Nomination by President and voted on by board members.

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name(s), address(es) and title(s):

President Joy Logan 3791 Salem Rd. Havana, FL 32333

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Joy Logan_ 3791 Salem Rd. Havana, FL 32333

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joy Logan 3791 Salem Rd. Havana, FL 32333

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.

Signature/Registered Agent ____

2/4/03

24/03

Date