

N04 60000 9461

(Requestor's Name)

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☐ PICK-UP

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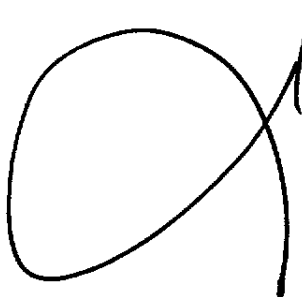
(Business Entity Name)

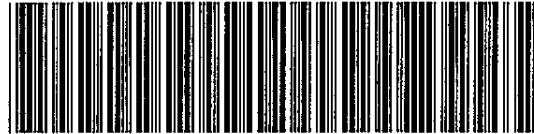
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 OCT -5 P 2:55

FILED

TRANSMITTAL LETTER

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

SUBJECT: Tall Pine, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Michael S. Wilson
Name (Printed or typed)

9334 Cumberland Isle Drive
Address

Jacksonville, FL 32257
City, State & Zip

(904) 483-6989
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

RECEIVED

04 OCT -5 PM 12:05

September 20, 2004

MICHAEL S. WILSON
9334 CUMBERLAND ISLE DRIVE
JACKSONVILLE, FL 32257

SUBJECT: TALL PINE, INC.
Ref. Number: W04000034788

We have received your document for TALL PINE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the 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) 245-6933.

Dale White
Document Specialist
New Filings Section

Letter Number: 304A00055344

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

ARTICLE I NAME

The name of the corporation shall be:

~~Tall Pine, Inc.~~ **BAD SWAMP, INC.**

ARTICLE II PRINCIPAL OFFICE

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

Michael S. Wilson
9334 Cumberland Isle Drive
Jacksonville, FL 32257

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Hunting Club

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Held elections

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Francis R. Herbert - Vice President
114 Citrus Lane
Ponte Vedra Beach, FL 32082

VJ Usina, III - Treasurer
4669 Avenue A
St. Augustine, FL 32095

Jeff E. Osborne - Secretary
1510 St. Marks POND Blvd, Lot H, St. Augustine, FL 32095

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Tracy K. Arthur, Esq
1901 Island Walkway, Suite 100
Fernandina Beach, FL 32034

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael S. Wilson
9334 Cumberland ISle Drive
Jacksonville, FL 32257

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

Signature/Incorporator

Date

Date

FILED
2004 OCT -5 P 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/13/04

9/13/2004