111000004946

	(Requestor's I	Name)	
	(Address)		
<u> </u>	(Address)		
	(City/State/Zip	/Phone #)	
, PICK	UP W	AIT [MAIL
	(Business Ent	ity Name)	
	(Document Nu	ımber)	
Certified Copies	Cert	ificates of Sta	tus
Special Instruction	ons to Filing Offic	er:	
			i
	ì		
Der KB)	11		
	Office	lso Only	

11/11 21/214



000205774330

04/29/11--01029--015 **87.50



MRS/20

COVER LETTER

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

SUBJECT: Retro 140937, Inc.				
	(PRÓPÔSED CORPORATI	E NAME – <u>MUST INCLU</u>	JDE SUFFIX)	
Enclosed is an original	and one (1) copy of the Artic	les of Incorporation and	l 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 CO	OPY REQUIRED	
FROM:	Ken Terry			
Name (Printed or typed)				
	2676 Slow Flight Drive			
Address				
Port Orange, FL., 32128-6840				
City, State & Zip				
386 322 5378				
Daytime Telephone number				
kenterry@cfl.rr.com				

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

E-mail address: (to be used for future annual report notification)



May 2, 2011

KEN TERRY 2676 SLOW FLIGHT DRIVE PORT ORANGE, FL 32128-6840

SUBJECT: RETRO 140937, INC. Ref. Number: W11000024310

We have received your document for RETRO 140937, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

It appears from the information given in your filing that the incorrect filing type and form was completed. See form enclosed for filing a profit corporation. You completed a non-profit form. Non-profit do not shares as mentioned in Article IV of the form you completed.

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) 245-6879.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 311A00010588

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

ARTICLE I The name of the co	NAME Retro 140937, Inc.	
ARTICLE II	PRINCIPAL OFFICE	
	Principal street address	Mailing address, if different is:
	2676 Slow Filaht Drive	
	Port Orange, FI 32128-6840	
ARTICLE III	PURPOSE	₹0 ÷
The purpose for w	which the corporation is organized is:	E = 7
Own and ope	erate aircraft.	
	•	ASS 20
		SERO P IT
ARTICLE IV	MANNER OF ELECTION The manner	
Is as stated in		
ARTICLE V	-	OR OR
		Name and Title:
Address:	2676 Slow Flight Drive	Address:
	Port Orange, FL., 32128-6840	
		•
	itle:	Name and Title:
Address:		Address:
Nome and T	isto	Name and Trial
Address:		Name and Title:Address:
	W7-112-1	
ARTICLE VI	REGISTERED AGENT	
	rida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name: Address:	Ken Terry	
Address:	2676 Slow Flight Drive Port Orange, FL., 32128-6840	
	Full Orange, F.L., 32120-0040	-
ARTICLE VII	MYCORPORATION	
	INCORPORATOR Iress of the Incorporator is:	
Name:	Ken Terry	
Address:	2676 Slow Flight Drive	
	Port Orange, FL., 32128-6840	
Having been name	ed as registered agent to accept service of pro	cess for the above stated corporation at the place designated in this
erujicate, 1 am jai	miliar with and accept the appointment as regist	ered agent and agree to act in this capacity
7		April 24, 2011
-	Required Signature of Registered Agent	Date
٠١		
SUDMU this docum o the Department	nent and affirm that the facts stated herein are of State constitutes of third degree felony as provi	true. I am aware that any false information submitted in a document ded for in a 817 155 F.S.
· = · · · · · · · · · · · · · · · · · ·	of community with a provi	wengur no artificial full
ST.	the state of the s	April 24, 2011
-	Required Signature of Interporator	Date