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SECRETARY OF STATE DIVISION OF CORPORATIONS

Ps stales

COVER LETTER

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

SUBJECT:		Jeadnipers, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)		
Enclosed is an original ar	nd one (1) copy of the Arti	icles of Incorporation and a check for:		
\$70.00	578.75	\$78.75		
Filing Fee	Filing Fee &	Filing Fee,		
	Certificate of Status	& Certified Copy Certified Copy		
	Status	& Certificate		
		ADDITIONAL COPY REQUIRED		
	Tarr	1		
FROM:	Jeff /	tinted or typed)		
	rvaine (1 1	anica of typeay		
	625 Comm	herce Dr., Ste. 103		
	A	Address		
	Lakeland	FL 33813 State & Zip		
	City,	State & Zip		
	(&3) 64 Daytime To	14-4003		
	Daytime Te	elephone number		
E-mail address: (to be used for future annual report notification)				

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

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

_	orporation shall be:		a Snipers, Inc.
RTIČLE II	PRINCIPAL OFFICE		Mailing address if different in
	Principal street address	te 103	Mailing address, if different is:
	Liveland Ph 33613		
RTICLE III	PURPOSE		
e purpose for w	which the corporation is organized is:	Public carvi	e club to account speachs
		المال المنام	ce club to promote spear has diver's rights.
		010 1554	divers rights,
RTICLE IV	MANNER OF ELECTION The	manner in which the directe	ors are elected and appointed:
			ors are elected and appointed: Cleated by Mi
RTICLE V	INITIAL OFFICERS AND/OR I	DIRECTORS	
	itle: Mile Sims Press		ile: D. William Garrison, Vice presid
Address:	625 Commerce Br. , Sh	Address:	625 Commune Drive, Ste. (03
	Lukeland FL 33413		inhelmy FL 33573
Nome and T	itle: Jeff Appel . Secretar	L Ken Wellows and Tie	da
Address:	6 Ages Low Group	Address:	ile:
	625 Commerce Dry SI		
	Lakeland FL 33h1		
Name and T	itle:	Name and Tit	tle:
Address:		Address:	
			- Ign
			AUG CRET
RTICLE VI	REGISTERED AGENT		+ 72
	orida street address (P.O. Box NOT acc	ceptable) of the registered ag	gent is:
Name: Address:	625 Comerce it.	Ste 103	AM 10: 49
ridai 033.	Lakelman AL 3351	3	5. A.
			64 88001
TIOI TITI	7MOODDOD 4 TOD		9 25
TICLE VII	INCORPORATOR dress of the Incorporator is:		
Name:	Jeffin E. AR	rel .	
Address:	625 Commerce D	r., Ste 103	
	inhelmed FZ 311	<u>in3</u>	
ving been nam	ed as registered agent to accept servio	e of process for the above	e stated corporation at the place designated in this
	miliar with and accept the appointment		
	Λ Λ		e.h.l.
	Required Signature of Register		8/4/11
	* Required Signature of Register	ed Agent	* Date
ibmit this docu	ment and affirm that the facts stated h	erein are true. I am aware	that any false information submitted in a document
he Department	of State constitutes a third degree felon	y as provided for in s.817.1	55, F.S.
/ /	1		8/4/4
(/ .	Required Signature of Inc		A/ G///