

P00000029424

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

600003174166--7
-03/17/00--01065--005
*****70.00 *****70.00

SUBJECT:

SHOGUN PROPERTIES, 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 of
Status

ADDITIONAL COPY REQUIRED

FROM:

NEIL P. MULVEY
Name (Printed or typed)

PO BOX 1509
Address

ALACHUA, FLORIDA 32616
City, State & Zip

352-472-2782 / 904-462-0732
Daytime Telephone number

FILED
00 MAR 17 PM 12:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

3-23
99C

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

SHOGUN PROPERTIES, Inc.

ARTICLE II PRINCIPAL OFFICE

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

14910 MAIN STREET - PO BOX 1509
ALACHUA, FLORIDA 32616

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

NEIL MULVEY - 22407 SW 71 Avenue
PO BOX 69 - NEWBERRY, FLORIDA 32669

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

NEIL MULVEY - 22407 SW 71 Avenue
PO BOX 69 Newberry, Florida 32669


Signature/Incorporator

3-17-00
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent


Signature/Registered Agent

3-17-00
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA