

TRANSMITTAL LETTER

P000000052089

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

SUBJECT: TrailFinder, Inc.
(Proposed corporate name - must include suffix)

800003261808--6
-05/22/00--01107--016
*****78.75 *****78.75

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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Jeffrey Jordan
Name (Printed or typed)

2133 Grove Place
Address

Clearwater, FL 33764
City, State & Zip

727-592-0629
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 MAY 22 AM 9:35

FILED

COPY

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

gy 5/30

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:

TrailFinder, Inc.

ARTICLE II PRINCIPAL OFFICE

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

5100 Ulmerton Road
Suite 1
Clearwater, FL 33760

ARTICLE III SHARES

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

1,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Jeffrey Jordan
2133 Grove Place
Clearwater, FL 33764

ARTICLE V INCORPORATOR

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

Jeffrey Jordan
3133 Grove Place
Clearwater, FL 33764


Signature/Incorporator

registered Agent

5/19/00
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

FILED
00 MAY 22 AM 9:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA