TRANSMITTAL LETTER

1000002411

Department of State **Division of Corporations**

FILED 01 JAN-2 AMII: 13 RY OF STATE ISEE, FLORIDA

Tallahassee, FL 3231	14		SECRETAT TALLAHAS
SUBJECT:	GENNY'S AMO	·	00000351S -01/02/01 *****78.75 .UDE 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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
FROM:	OM: GENNIFER M HICKEY Name (Printed or typed)		
3229 BROOK DR Address			Maritani and an Amerika di Sana
LAKELAND FL 33811			
City, State & Zip			·
863-647-3334			

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

Daytime Telephone number

ARTICLES OF INCORPORATION

In compliance-with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

GENNY'S AMOCO, INC.

OI JAN-2 AHII: 14 TILLAHASSEE, FLORIDA

<u>ARTICLE II PRINCIPAL OFFICE</u>

The principal place of business/mailing address is:

GENNY'S AMOCO, INC 1155 W PIPKIN RD LAKELAND FL 33811

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO OPERATE A CONVENIENCE STORE WITH GASOLINE

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS DIRECTORS (optional)

The name(s) and address(es):

GENNIFER M HICKEY 3229 BROOK DRIVE LAKELAND FL 33811

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

GENNIFER M HICKEY 3229 BROOK DR LAKELAND FL 33811

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GENNIFER M HICKEY 3229 BROOK DR LAKELAND FL 33811

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

12-28-00

Date