

TRANSMITTAL LETTER

P010000022120

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

200003706172--6
-02/16/01--01003--012
*****78.75 *****78.75

SUBJECT: MORRISON and Morrisons; T.N.C.
(PROPOSED CORPORATE NAME ~~MUST~~ INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$10.00 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: EVERALD G. MORRISON
Name (Printed or Typed)

5901 Saville Ct.
Address

Orlando Florida, 32810
City, State & Zip

407.292.2763
Daytime Telephone Number

FILED
01 MAR - 1 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Feb 31

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FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 16, 2001

EVERALD G MORRISON
5901 SAVILLE CT
ORLANDO, FL 32810

SUBJECT: MORRISON & MORRISONS, INC.
Ref. Number: W01000003744

We have received your document for MORRISON & MORRISONS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the 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) 487-6926.

Gina Bullock
Document Specialist

Letter Number: 801A00009855

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:

MORRISON + MORRISONS, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5901 Saville Ct.
Orlando Fl. 32810

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To operate a small family business with other subsidiaries now and in the future.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Anna MORRISON, EVERALD MORRISON
5901 Saville Ct.
Orlando, Fl. 32810

ARTICLE VI REGISTERED AGENT

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

EVERALD G. MORRISON
5901 Saville Ct.
Orlando Fl. 32810

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Anna E MORRISON
5901 Saville Ct.
Orlando, Fl. 32810

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

Everald G. Morrison
Signature/Registered Agent

Date

2/21/01

Anna E. Morrison
Signature/Incorporator

Date

2/21/01

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TALLAHASSEE, FLORIDA