

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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	(Corporation Name)	(Document #) #****78.75	*****78.75
2	(Corporation Name)	(Document #)	Element 7.5
	(corporation : name)	(Document #)	
3	(Corporation Name)	(Document #)	• • • •
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1	(Corporation Name)	(Document #)	er e
1	☐ Walk in ☐ Pick up time	Certified Copy	
	Mail out Will wait	Photocopy	
<u>N</u>	EW FILINGS	<u>AMENDMENTS</u>	7
	Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
<u>o</u>	THER FILINGS	REGISTRATION/QUALIFICATION	
	Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	

CR2E031(7/97)

Examiner's Initials P4 3/4/7



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 20, 2001

WAYMON E MEADOWS P O BOX 668 DUNDEE, FL 33838

SUBJECT: OLD CONCEPT COMPANY, INC.

Ref. Number: W01000006308

We have received your document for OLD CONCEPT COMPANY, 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 have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.)

The registered agent must sign accepting the designation.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 487-6915.

Pamela Hall Document Specialist

Letter Number: 201A00016878

Florida Department of State Pamela Hall Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

RE: Old Concept Company, Inc.

Ref. #W0100006308

Dear Ms. Hall:

Enclosed please find the corrected form containing the additional information that you require.

I hope that this will help in expediting the completion of this application.

If you have any further questions, please call me at 863-439-5542.

Sincerely,

Waymon E. Meadows

Old Concept Company, Inc.

President

WM:gs

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

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Old Concept Company, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

310 Hwy 542, Dundee, FL 33838 P. O. Box 668, Dundee, FL 33838

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sell Real Estate

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

Waymon E. Meadows 404 Ridgewood Avenue Dundee, FL 33838

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Waymon E. Meadows (also Registered Agent)

***************	****************
Having been named as registered agent to accept service of pr	ocess for the above stated corporation of the whole designed it
certificate I am familiar with and accept the appointment as re	egistered agent and agree to act in this capacity
Signature/Registered Agent	<u> </u>
Signature/Registered Agent	Dáte
	,

Signature Incorporator

____3/28/b/_ Date