

PO1000056533

TRANSMITTAL LETTER

FILED

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

01 JUN -7 PM 2:01

SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: Wild Adventures Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

600004271426--5
-05/18/01--01088--007
*****87.50 *****87.50

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: Terry Mullins
Name (Printed or typed)

690 S.W. Magnolia Ave
Address

Keystone Heights, FL. 32656
City, State & Zip

352-473-6418
Daytime Telephone number

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

3✓
D. WHITE JUN - 7 2001

5/25/01 8:48 no answer



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 25, 2001

TERRY MULLINS
690 SW MAGNOLIA AVE
KEYSTONE HEIGHTS, FL 32656

SUBJECT: WILD ADVENTURES INC.
Ref. Number: W01000011961

We have received your document for WILD ADVENTURES INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 487-6933.

Dale White
Document Specialist
New Filings Section

Letter Number: 601A00032228

ARTICLES OF INCORPORATION

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

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Adventure Quest Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

343 U.S. Hwy. 17 S.
E. Palatka, FL. 32131

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

General Business

ARTICLE IV SHARES

The number of shares of stock is:

100,000.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Terry Mullins
690 S.W. Magnolia Ave.
Keystone Heights, FL. 32656

ARTICLE VI REGISTERED AGENT

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

Terry Mullins
690 S.W. Magnolia Ave.
Keystone Heights, FL. 32656

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Terry Mullins
690 S.W. Magnolia Ave
Keystone Heights, FL 32656

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

06/05/01
Date


Signature/Incorporator

06/05/01
Date