

201000092691

TRANSMITTAL LETTER

FILED

01 SEP 19 PM 1:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

600004598446--9  
-09/19/01--01052--004  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Sally Ventures INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Niall Scally  
Name (Printed or typed)

539 Calle Escada  
Address

Santa Rosa Beach, FL 32459  
City, State & Zip

850-267-4949  
Daytime Telephone number

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

C. BLALOCK SEP 21 2001

**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: Sally Ventures INC

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: 539 Calle Escada  
Santa Rosa Beach, Fl. 32459

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Consulting & Land Management

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s): Niall Scally  
539 Calle Escada  
Santa Rosa Beach, Fl. 32459  
Director  
President  
Secretary  
Treasurer

**ARTICLE VI REGISTERED AGENT**

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

Niall Scally  
539 Calle Escada  
Santa Rosa Beach, Fl. 32459

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Niall Scally  
539 Calle Escada  
Santa Rosa Beach, Fl. 32459

\*\*\*\*\*  
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

Niall Scally  
Signature/Registered Agent

9/18/01  
Date

Niall Scally  
Signature/Incorporator

9/18/01  
Date