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TRANSMITTAL LETTER

FILED

2001 NOV 19 PM 4:42

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

400004621234--2

-10/03/01--01025--004

\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: SHARON CAMERON ENTERPRISES INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE 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

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM:

SHARON CAMERON

Name (Printed or typed)

RT 3, BOX 529-F

Address

STARKS, FL 32091

City, State & Zip

352-468-1195

Daytime Telephone number

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

YES 11/19  
Wol-23050  
y 10/4



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

October 4, 2001

SHARON CAMERON  
RT. 3, BOX 529-F  
STARKE, FL 32091

SUBJECT: SHARON CAMERON ENTERPRISES, INC.  
Ref. Number: W01000023050

We have received your document for SHARON CAMERON ENTERPRISES, 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 document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 245-6878.

Alan Crum  
Document Specialist  
New Filing Section

Letter Number: 901A00055762

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

SHARON CAMERON ENTERPRISES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

RT. 3, BOX 529-F  
STARKE, FL. 32091

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FEE PROCESSING

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

SHARON S. CAMERON  
RT 3, BOX 529-F  
STARKE, FL 32091

ARTICLE VI REGISTERED AGENT

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

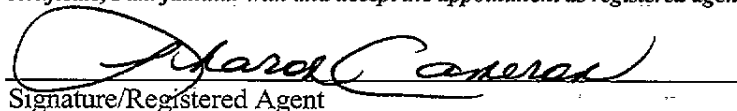
SHARON CAMERON  
10705 S.E. 49TH AVE.  
STARKE, FL. 32091

ARTICLE VII INCORPORATOR

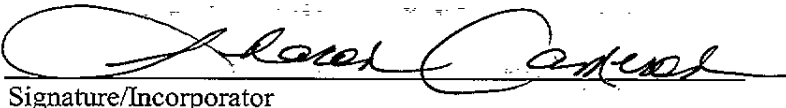
The name and address of the Incorporator is:

SHARON CAMERON  
~~10705 S.E.~~  
RT 3, BOX 529-F  
STARKE, FL. 32091

\*\*\*\*\*  
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

8/20/01  
Date

  
Signature/Incorporator

10/31/01  
Date