

TRANSMITTAL LETTER

P02000013034

APPROVED
AND
FILED

FEB -5 PM 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: NANCO ENTERPRISES, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

100004881451--0
-02/05/02--01053--027
*****87.50 *****87.50

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: NANCY L. MEIGHAN
Name (Printed or typed)

3992 NE 19TH AVE
Address

Ocala FLORIDA, 32179
City, State & Zip

352-629-7787
Daytime Telephone number

RECEIVED
02 FEB -5 PM 1:42
DIVISION OF CORPORATION

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

45

JB 2/5

ARTICLES OF INCORPORATION

of
NANCO ENTERPRISES, INC.
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

NANCO ENTERPRISES, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED shares (500) of ONE
Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>NANCO ENTERPRISES, INC.</u>		
ADDRESS	<u>3992 NE 19TH AVE</u>		
CITY	<u>OCALA</u>	FLORIDA	ZIP <u>34479</u>

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	<u>NANCY L. MEIGHAN</u>		
ADDRESS	<u>3992 NE 19TH AVE</u>		
CITY	<u>OCALA</u>	FLORIDA	ZIP <u>34479</u>

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>NANCY L. MEIGHAN</u>		
ADDRESS	<u>3992 NE 19TH AVE</u>		
CITY	<u>OCALA</u>	STATE <u>FLORIDA</u>	ZIP <u>34479</u>
NAME	<u>WILLIAM MEIGHAN</u>		
ADDRESS	<u>3992 NE 19TH AVE</u>		
CITY	<u>OCALA</u>	STATE <u>FLORIDA</u>	ZIP <u>34479</u>
NAME			
ADDRESS			
CITY		STATE	ZIP

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ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	NANCY L. MEIGHAN		
ADDRESS	3992 NE 19TH AVE		
CITY	Ocala	STATE	FL ZIP 34479
NAME	WILLIAM J. MEIGHAN		
ADDRESS	3992 NE 19TH AVE		
CITY	Ocala	STATE	FL ZIP 34479
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 4th day of FEBRUARY, 2002.


Nancy L. Meighan (Seal)
William J. Meighan (Seal)
 _____ (Seal)

STATE OF FLORIDA)
 COUNTY OF Marion) SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

Nancy L. Meighan Signature FDL# M250639497070 Form of Identification
William J. Meighan Signature FDL# M250930451350 Form of Identification
 _____ Signature _____ Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that _____ executed these Articles of Incorporation, that I relied upon the form ☒ of identification of the above named person _____ as indicated opposite each name, and that an oath (was)(was not) taken.

NOTARY RUBBER STAMP SEAL

 Lawrence A. Ernest
 My Commission DD019484
 Expires April 22, 2005

Witness my hand and official seal in the County and State last aforesaid this 4th day of February, 2002
Lawrence A. Ernest
 Notary Signature
Lawrence A. Ernest
 Printed Notary Signature

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

NANCO ENTERPRISES, INC.

(name of corporation)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 3992 NE 19TH AVE
OCALA, FLORIDA

has named NANCY L. MEIGHAN

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Nancy L. Meighan
(registered agent)
NANCY L. MEIGHAN