

PD2000069899

TRANSMITTAL LETTER

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

500005937935--9
-06/24/02--01083--003
*****78.75 *****78.75

SUBJECT: Smathers Financial Group, 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:

William H. Smathers

Name (Printed or typed)

PO Box 435

Address

Mount Dora, FL 32756

City, State & Zip

352 383 8324 / 352 636 54

Daytime Telephone number

CELL

02 JUN 24 PM 1:43
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

D. WHITE JUN 25 2002

original

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: *SMATHERS FINANCIAL GROUP, INC.*

FILED

02 JUN 24 PM 1:43

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: *PO Box 435
MT Dora, FL 32756-0435*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
FINANCIAL ADVISING

ARTICLE IV SHARES

The number of shares of stock is: *1,000 a par*

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):
*William H. Smathers, President & Secretary
PO Box 435, MT Dora, FL 32756-0435*

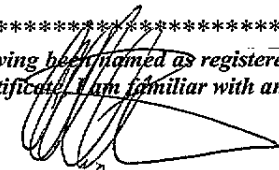
ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: *William H. Smathers
6779 Clayton Street
Tangerine, FL 32777*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
*William H. Smathers
PO Box 435, MT Dora, FL 32756-0435*

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

6/18/02
Date


Signature/Incorporator

6/18/02
Date