

P02000114541

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

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-10/02/02--01031--001
*****70.00 *****70.00

SUBJECT: Lost Creek Farms 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: Abbie Polph
Name (Printed or typed)

P.O. Box 629
Address

Greenwood, FL 32443
City, State & Zip

850-292-4941
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 OCT 24 PM 1:34

FILED

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

44. 10/21



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State

October 4, 2002

ABBIE ROLPH
P.O. BOX 629
GREENWOOD, FL 32443

SUBJECT: LOST CREEK FARMS INC.
Ref. Number: W02000028732

We have received your document for LOST CREEK FARMS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address 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) 245-6067.

Neysa Culligan
Document Specialist
New Filing Section

Letter Number: 802A00055848

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:

Lost Creek Farms, Inc.

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02 OCT 24 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 629 Greenwood, FL 32443

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Animal production and Agriculture

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Dr. Che Trejo P.O. Box 629 Greenwood, FL 32443
Mrs. Laura Trejo P.O. Box 629 Greenwood, FL 32443
Mr. Rennie Lee Rolph Jr. P.O. Box 629, Greenwood, FL 32443
Mrs. Abbie Rolph P.O. Box 629, Greenwood, FL 32443

ARTICLE VI REGISTERED AGENT

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

~~*P.O. Box 629 Greenwood, FL 32443*~~
Che Trejo 8600 Reese Seale Rd.
Walnut Hill, FL 32568

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Abbie Rolph
P.O. Box 629, Greenwood, FL 32443.

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

Date

Signature/Incorporator

Date

9/21/02

9/21/02