

P02000124775

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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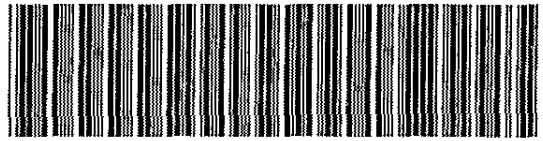
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
02 NOV 19 PM 3:54

11-22-02  
1190

## TRANSMITTAL LETTER

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

SUBJECT: CLASSIC ALPACAS, 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: GILLIAN H. RATCLIFF  
Name (Printed or typed)

7279 NORTH CAESAR-POINTE  
Address

DUNNELLON, FLORIDA 34433  
City, State & Zip

(352) 465 3679  
Daytime Telephone number

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

# 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:

Classic Alpacas, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7279 North Caesar Pointe,  
Dunnellon, Florida 34433

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To breed, raise, buy, and sell alpacas and other animals and the bi-products created by them in any and all ways that are legal and permitted by law.

## ARTICLE IV SHARES

The number of shares of stock is:

One hundred

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Gillian H. Ratcliff

7279 N. CAESAR PT.,  
DUNNELLON,  
FL 34433

PRESIDENT

## ARTICLE VI REGISTERED AGENT

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

Gordon K. Ratcliff  
7279 N. CAESAR PT., DUNNELLON, FLORIDA 34433

## ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Gillian H. Ratcliff  
7279 North Caesar Pointe, Dunnellon, Florida 34433

\*\*\*\*\*  
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

11/14/02  
Date

  
Signature/Incorporator

11/14/02  
Date

GILLIAN H. RATCLIFF

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SECRETARY OF CORPORATIONS  
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