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(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 APR 14 AM 10:08

✓

4-16-03
110

TRANSMITTAL LETTER

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

SUBJECT: GARY OLIVE, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: GARY OLIVE

Name (Printed or typed)

PO BOX 518

Address

BRANFORD, FL 32008

City, State & Zip

386/935-1442

Daytime Telephone number

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



RECEIVED

03 APR -2 PM 4:11

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 19, 2003

GARY OLIVE
P. O. BOX 518
BRANFORD, FL 32008

SUBJECT: GARY OLIVE, INC.
Ref. Number: W03000007967

We have received your document for GARY OLIVE, 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) 245-6995.

Wanda Cunningham
Document Specialist
New Filings Section

Letter Number: 803A00017004

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:

GARY OLIVE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

PO BOX 518
BRANFORD, FL 32008

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES AND OTHER RETAIL SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

GARY OLIVE
PO BOX 518
BRANFORD, FL 32008

ARTICLE VI REGISTERED AGENT

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

GARY OLIVE
10065 US 129 SOUTH
LIVE OAK, FL 32060-9800

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GARY OLIVE
PO BOX 518
BRANFORD, FL 32008

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

Gary B Olive

Signature/Registered Agent

4-1-03

Date

Gary B Olive

Signature/Incorporator

4-1-03

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 APR 14 AM 10:09