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TRANSMITTAL LETTER

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

SUBJECT: YNOP Farm Inc. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)				
Enclosed are an orig	final and one (1) copy of the art	icles of incorporation and	l a check for:	
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED	
FROM:	Carol LAT	JUKE (Printed or typed)		
	2495 Dae	Address		
	Loxahatch	ee, FLorid State & Zip	<u>a 33470</u>	
	561- Daytime	790-0761 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: YOOP Farm Inc.	<u> </u>
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 2495 Doe Trail Loxahatchee, Florida 33470	03 M
ARTICLE III PURPOSE The purpose for which the corporation is organized is: School OF Horsemanship and Riding School	AY 23 PH 3:
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Carol LADUKE, / Director 2495 Doe Trail Loxahatchee, FL. 33470 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Carol LaD 2495 Doe Trail Loxahatchee, Florida 33470	uke
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Carol LADUKE 2495 DoeTrail LoLahatchee, Florida 33470	********
Having been named as registered agent to accept service of process for the above stated corporation a certificate, I am familiar with and accept the appointment as registered agent and agree to act in this can be appointed as signature. Signature Registered Agent	
Signature/Incorporator LADUKS	5-13-03 Date \$13-08