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J. 1/3

(SAMPLE LETTER OF TRANSMITTAL)

DATE

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 O3 JIM -5 PH 1:56

Re: MOUNT GILEAD, Inc.

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

Please Mail copies To:
William J. Wind off
RT2, POX 1885 2066
RT2, Fla
MAYO, Fla

Muskeum (Individual's Name)

MOUNT CILE Ad INC (Name of Corporation)

MAILING ADDRESS OF CORPORATION

18305 | 56 57 pect

Live ON, Floridazida

PHONE

(386) 294 3026 None

Area Code Number Ext.

ARTICLES OF INCORPORATION MOUNT GILEAD, INC. The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation: ARTICLE I - CORPORATE NAME The name of the corporation is: MOUNT Gilead, INC ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law. ARTICLE III - PURPOSE The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida, ARTICLE IV - CAPITAL STOCK The corporation is authorized to issue 100 shares of common stock, par value \$ 10.00 per share. ARTICLE V - INITIAL PRINCIPAL OFFICE The street address of the initial principal office and, if different, the mailing address is: ZIP 3 Z060 Mailing address, if different STREET ADDRESS **CITY FLORIDA** ZIP ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT The street address of the initial registered office and the name of the initial registered agent at the office is:

Form 215: ARTICLES OF INCORPORATION, PAGE 1

PAGE 1

FLORIDA Florida

SEMINOLE-MIAMI (2-98)

ZIP 32060

	INITIAL BOARD OF DIRECTORS	
This corporation shall have Ree either increased or diminished from time to time by the		
addresses of the initial director(s) of the corporation as	•	(-,
NAME LAMAR SENKINS		
ADDRESS 18305 156 ST.		
CITY LIVE OAK	STATE F/A	ZIP 32060
NAME Edward Mecollister		
ADDRESS (8 305 156 ST.		
CITY LIVE VAW	STATE FIL	ZIP 3 2060
NAME Bill Eddie		
ADDRESS 18 305 156 ST,		
CITY LIVE OAK	STATE F/A	ZIP 32060
ARTICL	E VIII - INCORPORATORS	
The names and addresses of the incorporators signing	these Articles of Incorporation are as follows:	ows:
NAME LAMAR JENKINS		
ADDRESS 18305 156 57		
CITY LIVE OFF	STATE Flu	ZIP 3 2060
NAME EdWARD MEEOLLISTER		
ADDRESS 18305 1565T	-	
CITY DOVE OAK	STATE F/A	ZIP 3 2060
NAME 13:11 Facte Eady		
ADDRESS 18305 15657		
ADDRESS [8305 [5657]	STATE F14	ZIP 72060
The undersigned incorporator(s) have executed the	nese Articles of Incorporation this	ath
day of Fabruary	, <u>Boo 3</u> .	•
,	. 1	
	Jamas Jonke	(Signature)
1	Lama Janher El D. M. Collect	
	Edul D. M. E College	(Signature)
	Rill Ender	(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

D3 JIH -6 PILED
TALLAGIAN FLORIDA

MOUNT CILEAD, INC.

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at18_	305	156 STRes	>T	
1	'UE WAL	5. Florida	32060	
has named	Joe	DReifus		

located at the aforesaid address, as its registered agent to accept service of process within this state.

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature) Signature)

2903