

P030000 76176

JOHN N. DAVIS

(Requestor's Name)

433 HARRISON AVE

(Address)

Panama City FL 32401

(Address)

(City/State/Zip/Phone #)

8605277393

☐ PICK-UP

☒ WAIT

☐ MAIL

AMERICAN GRAY FOX, INC.

(Business Entity Name)

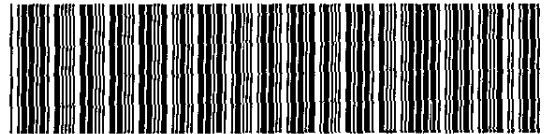
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RECEIVED  
03 JUL 11 PM 1:44  
DIVISION OF CORPORATION  
TALLAHASSEE, FLORIDA  
FILED  
03 JUL 11 PM 1:57  
SECRETARY OF STATE

2-11-03  
0-87

**ARTICLES OF INCORPORATION  
OF**

**American Gray Fox, Inc.**

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03 JUL 11 PM 1:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a corporation under the laws of the State of Florida, do hereby adopt the following articles of incorporation:

**ARTICLE ONE**

The name of the corporation is: **American Gray Fox, Inc.**

**ARTICLE TWO**

**Corporate Duration**

The duration of the corporation is perpetual.

**ARTICLE THREE**

**Purpose or Purposes**

The general purposes for which the corporation is organized are:

1. Provide private investigation services, courier services, civil process service services, electronic services.
2. To engage in any other trade or business which can, in the opinion of the board of directors of the corporation, be advantageously carried on in connection with or auxiliary to the foregoing business.
3. To do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing.

**ARTICLE FOUR**

**Capitalization**

The aggregate number of shares which the corporation is authorized to issue is 1,000. Such shares shall be of a single class, and shall have a par value of One Dollar (\$1.00) per share.

**ARTICLE FIVE**  
**Registered Office and Agent**

The street address of the initial registered office of the corporation is: 433 Harrison Avenue, Panama City, FL 32401, and the name of its initial Registered Agent at such address is JOHN N. DAVIS. The principal place of business is the same as the registered office.

**ARTICLE SIX**  
**Directors**

The number of directors constituting the initial board of directors of the corporation is TWO (2). The name and address of each person who is to serve as a member of the initial board of directors is:

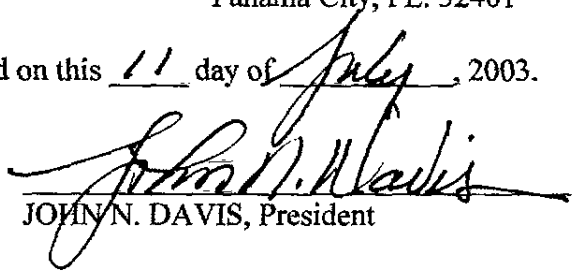
<u>Name</u>	<u>Address</u>
JOHN N. DAVIS	433 Harrison Avenue Panama City, FL. 32401
JEROME K. DAVIS	433 Harrison Avenue Panama City, FL. 32401

**ARTICLE SEVEN**  
**Incorporators**

The name and address of each incorporator is:

<u>Name</u>	<u>Address</u>
JOHN N. DAVIS	433 Harrison Avenue Panama City, FL. 32401
JEROME K. DAVIS	433 Harrison Avenue Panama City, FL. 32401

Executed by the undersigned on this 11 day of July, 2003.

  
JOHN N. DAVIS, President

STATE OF FLORIDA  
COUNTY OF BAY

BEFORE ME, the undersigned authority, on this 11<sup>th</sup> day of July, 2003,  
personally appeared, **JOHN N. DAVIS**, to me well known to be the person described in and who  
signed the foregoing, and acknowledged to me that he executed the same freely and voluntarily  
for the uses and purposes therein expressed, and who is personally known to me or who has  
produced \_\_\_\_\_ as identification.

WITNESS my hand and official seal the date aforesaid.



Marjorie K. Harris  
MY COMMISSION # DD015865 EXPIRES  
July 31, 2005  
BONDED THRU TROY FAIR INSURANCE, INC.

*Marjorie K. Harris*  
NOTARY PUBLIC-STATE OF FLORIDA

Printed Name of Notary: MARJORIE K. HARRIS

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

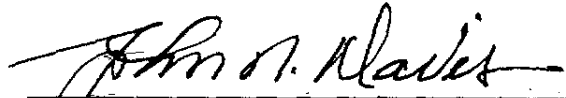
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT AND REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is American Gray Fox ~~Attorney Services~~, Inc.
2. The name and address of the Registered Agent and office is:

JOHN N. DAVIS  
433 HARRISON AVENUE  
PANAMA CITY, FL. 32401

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.

  
John N. Davis, Registered Agent


STATE OF FLORIDA  
COUNTY OF BAY

BEFORE ME, the undersigned authority, on this 11<sup>th</sup> day of July, 2003, personally appeared, **JOHN N. DAVIS**, to me well known to be the person described in and who signed the foregoing, and acknowledged to me that he executed the same freely and voluntarily for the uses and purposes therein expressed, and who is personally known to me or who has produced \_\_\_\_\_ as identification.

WITNESS my hand and official seal the date aforesaid.



Marjorie K. Harris  
MY COMMISSION # DD015865 EXPIRES  
July 31, 2005  
POWERED BY TROY FAIN INSURANCE, INC.

  
NOTARY PUBLIC-STATE OF FLORIDA  
Printed Name of Notary: MARJORIE K. HARRIS