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(Re	questor's Name)	
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PICK-UP		MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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TRANSMITTAL LETTER

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

LOWE'S PACKAGE STORES INC. SUBJECT: (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	Status
ADDITIONAL CO	IPY KEQUIKED

FROM: William Loren Smith

Name (Printed or typed)

10292 Front Beach Road

Address

Panama City Beach, FLORIDA 32408

City, State & Zip

850 230 1026

- -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: LOWE'S PACKAGE STORES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 10292 Front Beach Road, Panama City Beach, FLORIDA 32408

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ______ To engage in the transaction of any or all lawful business for which corporations may be incorporated under the law of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): William Loren Smith, President

10292 Front Beach Road Panama City Beach, FL 32408

1204 Lisenby Avenue Panama City, FL 32401

Kimberely Elizabeth Smith, Vice President

ARTICLE VI REGISTERED AGENT

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

Sharon Barnes Broussard, Registered Agent

101 Sea Oats Drive Panama City Beach, FL 32413

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

William Loren Smith

10292 Front Beach Road Panama City Beach, FL 32408

Having been pamed as registered agent to accept service of process for the above stated corporation at the place designated in this certificate) fam familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered . . ture/Incofi

Date

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