

P030000997 35

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

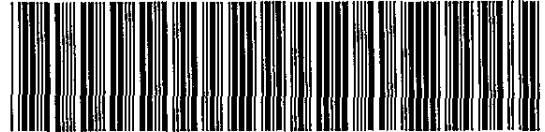
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600022781036

09/12/03--01001--001 **87.50

DIVISION OF CORPORATION

03 SEP 11 PM 2:33

RECEIVED

03 SEP 11 PM 2:40

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

55

TRANSMITTAL LETTER

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

SUBJECT: OKALOOSA FINANCIAL SERVICES, 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

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: OKALOOSA FINANCIAL SERVICES, INC.
Name (Printed or typed)

1455 SOUTH FERDON, BUILDING D, UNIT 3
Address

CRESTVIEW, FL 32536
City, State & Zip

1-800-725-0318
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 SEP 11 PM 2:40

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be: OKALOOSA FINANCIAL SERVICES, INC.

03 SEP 11 PM 2:40

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 1455 SOUTH FERDON BOULEVARD, BUILDING D, UNIT 3
CRESTVIEW, FL 32536

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to operate a consumer finance company and to transact any and all business for which corporations may be incorporated under this chapter.

ARTICLE IV SHARES

The number of shares of stock is: SEVENTY-FIVE (75) SHARES - NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

PRESIDENT and DIRECTOR: Shirley J. Milligan, 1455 S. Ferdon Blvd., Bldg.D, Unit 3,
Crestview, FL 32536

SECRETARY-TREASURER and DIRECTOR: Lester E. Dees, 8440 Bluebonnet Blvd., Ste.A,
Baton Rouge, LA 70810

ARTICLE VI REGISTERED AGENT

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

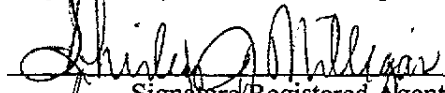
Shirley J. Milligan, 1455 S. Ferdon Blvd., Bldg.D, Unit 3, Crestview, FL 32536

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Shirley J. Milligan, 1455 S. Ferdon Blvd., Bldg.D, Unit 3, Crestview, FL 32536

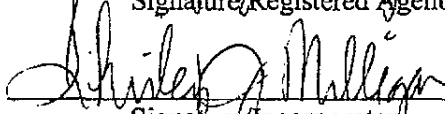
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent SHIRLEY J. MILLIGAN

9-11-03

Date



Signature/Incorporator SHIRLEY J. MILLIGAN

9-11-03

Date