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# TRANSMITTAL LETTER

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

SUBJECT:	ECT. Enay Corporation			
	(PROPOSED CORPOR	ATE NAME <u>– MUST INC</u> L	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	I a check for:	
☐ \$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED	
FROM:	Grace E. Strawn Name (Printed or typed)			
	PO Box 775 Address			
	Williston, FL 32696 City, State & Zip			
	(352)528-2105 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:

**Enay Corporation** 

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: PO Box 775 Williston, FL 32696

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

# ARTICLE IV SHARES

The number of shares of stock is: 5,000

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Grace E. Strawn 435 Northeast 3rd Avenue Williston, FL 32696 - President

Grace E. Strawn 435 Northeast 3rd Avenue Williston, FL 32696 - Secretary/Treasurer

Grace E. Strawn 435 Northeast 3rd Avenue Williston, FL 32696 - Director

## ARTICLE VI REGISTERED AGENT

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

Grace E. Strawn 435 Northeast 3rd Avenue Williston, FL 32696

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Grace E. Strawn 435 Northeast 3rd Avenue Williston, FL 32696

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

Signature/Incorporator

Date

Date