

P03000126734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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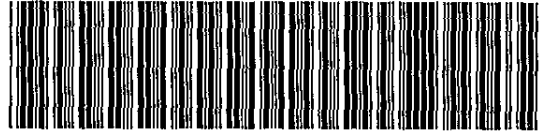
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
TALLAHASSEE
FLORIDA

03 OCT 31 PM 6:09

FILED

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TRANSMITTAL LETTER

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

SUBJECT: IT HAPPENS INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

JAMES E. CAIN JR
Name (Printed or typed)

5345 W WOODLAWN ST
Address

DUNNELLON FL 34433
City, State & Zip

352-465-1022
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)

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ARTICLE I NAME

The name of the corporation shall be:

IT HAPPENS INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5545 W WOODLAWN ST
DUNNELLON FL 34433

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO COMPLY WITH THE LAW

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JAMES E. CAIN JR
PRESIDENT

5545 W WOODLAWN ST
DUNNELLON FL 34433

DALE CAIN
VICE PRESIDENT/SECRETARY
5545 W WOODLAWN ST
DUNNELLON, FL 34433

ARTICLE VI REGISTERED AGENT

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

JAMES E CAIN JR

5545 W WOODLAWN ST
DUNNELLON FL 34433

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DALE CAIN

5545 W WOODLAWN ST
DUNNELLON FL 34433

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

Date

10/30/03

Signature/Incorporator

Date

10/30/03