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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Island Gal Inc

Signature _____

Requested by: AW

Name _____

Date 11/12

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☒ Art of Inc. File _____

____ LTD Partnership File _____

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____ Fictitious Name File _____

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☒ Annual Report / Reinstatement _____

____ Cert. Copy _____

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____ Certificate of Good Standing _____

____ Certificate of Status _____

____ Certificate of Fictitious Name _____

____ Corp Record Search _____

____ Officer Search _____

____ Fictitious Search _____

____ Fictitious Owner Search _____

____ Vehicle Search _____

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____ UCC 1 or 3 File _____

____ UCC 11 Search _____

____ UCC 11 Retrieval _____

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ARTICLES OF INCORPORATION
OF
ISLAND GAL, INC.

FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned Incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be Island Gal, Inc.

ARTICLE II PRINCIPAL OFFICE

The street address of the principal office is 4445 Pine Island Road, Matlacha, Florida 33993, and mailing address of this corporation shall be P.O. Box 623, Matlacha, Florida 33993.

ARTICLE III CAPITAL STOCK

The aggregate number of shares which the corporation shall have authority to issue is SEVEN THOUSAND FIVE HUNDRED (7,500) SHARES, consisting of one class only designated as "common stock," with par value of \$1.00 per share.

The Stock of the corporation shall be restricted as to transfer as follows, which restriction shall be imprinted upon the stock certificates issued by the corporation:

No stock of the corporation shall be transferred until such transfer has been proposed in writing to the Board of Directors of the corporation by written proposal filed with them stating the number of shares to be transferred, the price per share, and the name of the transferee. The Board of Directors shall within sixty (60) days after receipt of such proposal either consent to the transfer or furnish a purchaser for the shares at the same price. Failure of the Directors to act upon such a proposal within sixty days after receipt thereof shall be deemed to consent by them to the proposed transfer. No such proposed transfer shall be made until the aforesaid sixty (60) days have expired or the Board of Directors has consented thereto.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is CAROLYN CAUDILL, and her address is 2490 Harbor View Drive, Matlacha, Florida 33993, and the designated agent by her signature hereon, does hereby declare that she is familiar with and accepts the duties, responsibilities and obligations as registered agent for said corporation pursuant to the provisions of Section 607.0501, Florida Statutes.

ARTICLE V INCORPORATOR

The name and street address of the Incorporator to these Articles of Incorporation is CAROLYN CAUDILL at 2490 Harbor View Drive, Matlacha, Florida 33993.

ARTICLE VI DIRECTOR

The number of the directors constituting the initial Board of Directors of the corporation is one (1), and thereafter the number of directors shall be such number as is fixed from time to time by the by-laws. The initial Board of Directors shall be the following: CAROLYN CAUDILL.

ARTICLE VII PERIOD OF EXISTENCE

The period of its existence is perpetual.

ARTICLE VIII PURPOSE

The purpose or purposes for which this corporation is organized is to engage in any lawful activities within the purposes for which a corporation may be organized under the Florida Business Corporation Law (Chapter 607 of the Florida Statutes).

The undersigned has executed these Articles of Incorporation this 11th day of November, 2003.

Carolyn A. Caudill

CAROLYN CAUDILL
Incorporator and
Registered Agent

STATE OF FLORIDA
COUNTY OF LEE

I HEREBY CERTIFY that on this day personally appeared before me, an officer of the State of Florida, authorized to administer oaths and take acknowledgements, CAROLYN CAUDILL, who () is personally known to me or (X) who has produced Florida Drivers License as identification.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at said County and State this 11th day November, 2003.

My commission expires:

Deborah J. Scheid
Notary Public



Deborah J. Scheid
Commission # DD093885
Expires Feb. 19, 2006
Bonded Thru
Atlantic Bonding Co., Inc.

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TALLAHASSEE FLORIDA