

P04000008074

(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



500025859535

01/05/04--01030--003 \*\*70.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 JAN -5 PM 6:16

1-12-04

## TRANSMITTAL LETTER

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

SUBJECT: KATABATIC WIND, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: DOUGLAS A. McLEAN  
Name (Printed or typed)

300 N. CIRCLE  
Address

SEBRING, FLA. 33870  
City, State & Zip

863-385-8850  
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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 JAN -5 PM 6:16

## ARTICLE I NAME

The name of the corporation shall be:

KATABATIC WIND, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

300 N. CIRCLE  
SEBRING, FLA. 33870

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RETAIL SALES OF MERCHANDISE

## ARTICLE IV SHARES

The number of shares of stock is:

5000 SHARES AT \$1 PAR

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DOUGLAS A. McLEAN - PRESIDENT, VICE-PRESIDENT, SECRETARY  
AND TREASURER  
300 N. CIRCLE  
SEBRING, FLA. 33870

## ARTICLE VI REGISTERED AGENT

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

DOUGLAS A. McLEAN  
300 N. CIRCLE  
SEBRING, FLA. 33870

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DOUGLAS A. McLEAN  
300 N. CIRCLE  
SEBRING, FLA. 33870

\*\*\*\*\*

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

DAMZ

Signature/Registered Agent

1/2/04  
Date

DAMZ

Signature/Incorporator

1/2/04  
Date