

PO4000076615

(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



600035391156

05/10/04--01053--004 \*\*70.00

FILED  
04 MAY 10 PM 1:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TSOS/12/04

## TRANSMITTAL LETTER

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

SUBJECT: MICANOPY MOON PRODUCTION FACILITY 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  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

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

**ADDITIONAL COPY REQUIRED**

FROM: LAWRENCE RAMBO

Name (Printed or typed)

13318 South U.S HWY 441 UNIT B

Address

MICANOPY FLORIDA 32667

City, State & Zip

352-466-4819

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:

MICANOPY MOON PRODUCTION FACILITY INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

13318 South U.S. Hwy 441 Unit #A  
Micanopy Florida 32667

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful bussines.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

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

Lawrence Rambo  
13318 South U.S. Hwy 441 Unit #B  
Micanopy Florida 32667

**ARTICLE VI REGISTERED AGENT**

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

Lawrence Rambo  
13318 South U.S. Hwy 441 Unit #B  
Micanopy Florida 32667

**ARTICLE VII INCORPORATOR**

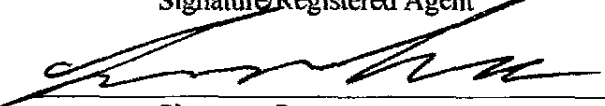
The name and address of the Incorporator is:

Lawrence Rambo  
13318 South U.S. Hwy 441 Unit #B  
Micanopy Florida 32667

\*\*\*\*\*  
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

4-30-04  
Date

  
Signature/Incorporator

4-30-04  
Date

04 MAY 10 PM 1:48  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA