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TRANSMITTAL LETTER

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

SUBJECT:	JOD Line FA (PROPOSED CORPORA)	em Inc. rename- <u>mustincl</u>	UD•SUT#X)		
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l 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 PPY REQUIRED		
FROM:	Dehan L. C	PAMEX (Printed or typed)			
	17110 TobA	CCO ROL Address		04 JUL 23	DIVISION
	Ludz Fl	33558 State & Zip		2	
-	813- 786- Daytime T	3251 elephone number		2: 39	

NOTE: Please provide the original and one copy of the articles.

Top Line Farm Inc. 1320 Huntsville Rd. Odessa, Fl 33556

To: The Department of State Division of Corporations 409 E. Gaines St. Tallahassee, Fl 32399

To Whom It May Concern: Top Line Farm Inc, Doc# P02000075305, that which was dissolved on 04/05/04. As President of Top Line Farm Inc, I will not revoke the Dissolution Doc# P02000075305. And I am releasing the name for use again. Any questions please call 813-786-3251. Thank You for this assistance in this matter.

Sincerely,

Dehan L. Cramer President

leda & Cram

Top Line Farm Inc

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:			
Top Line FARM Inc.	•		
rop rate man = no.			
ARTICLE II PRINCIPAL OFFICE			
The principal place of business/mailing address is:			
17110 Tobacco Rd			
Lutz, FI 33558			
ARTICLE III PURPOSE			
The purpose for which the corporation is organized is:			
Horse FARM			
770132 1772411			
ARTICLE IV SHARES			
The number of shares of stock is:			
/00			
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS			
List name(s), address(es) and specific title(s):			
Dehan L. Cramer Pres. YP. Sec. Tus.		0	9
17110 Tobacco Rd		04 JUL 23	¥SE SE
• -		F	室器
Lutz, F1 33558		23	-
ARTICLE VI REGISTERED AGENT		=	بدار کرد. کنه پخت و پر
The name and Florida street address (P.O. Box NOT acceptable) of the registe	ered agent is:		
Dehan L. Clamer		2: 39	مان ريانيا
17110 Tobacas Rd		30	5.44
Lutz F1 33558			
ARTICLE VII INCORPORATOR			
The <u>name and address</u> of the Incorporator is:			
Dehan LCRampe			
17110 Tobacco Rel			
Led2 F1 33558			

certificate, I am familiar with and accept the appointment as registered agent and agree to act in	n this capacity	acorginal c	
	2/22/	. 1	
Meha & Games	1/32/0	<u>L</u>	
Signature/Registered Agent	Date		
Ocho & Manie	7/22 /2	17	
Signature/Incorporator	Date	7	
Digitator a movi portator	~~~		