## P04000113405

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
NU1-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Office Use Only



07/21/04--01020--011 \*\*87.50

FILED 04 AUG -3 PH 3: 02 ALLAHASSEE, FLORIDA



## TRANSMITTAL LETTER

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

FUNKY MONKEY STABLE, INC. SUBJECT: INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

S70.00 Filing Fee

\$78.75
Filing Fee
& Certificate of Status

<b>3</b> \$78.75	\$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL CO	PY REQUIRED

Name (Printed or typed) FROM: Waverly . ... Address City, State & Zip 56 Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 21, 2004

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WAVERLY ERNST PO BOX 771138 OCALA, FL 34477

SUBJECT: FUNKY MONKEY STABLE, INC. Ref. Number: W04000028047

We have received your document for FUNKY MONKEY STABLE, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Document Specialist New Filings Section

Letter Number: 704A00046253

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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P.	· 17	148 B 11 J

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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME		SECRET/ TALLAHA	F 04 AUG -	
ARTICLE I NAME The name of the corporation shall be:		SSE	3	
FUNKY MONKEY STABLE, INC.		OF STA E, FLOF	ED PH 3:	
ARTICLE II PRINCIPAL OFFICE	, <b>.</b>	AON	02	
The principal place of business/mailing address is:				
18780 NW 35th St	· ·			
OCA4, FL 34482				_
ARTICLE III PURPOSE				
The purpose for which the corporation is organized is: Breed, race and sell phoroughbre	1 horses	Fir	CACIN	1Ä
Direct The arts SCIT THOROUGHDA	J 110100	101	10.001	J
purposes.				
ARTICLE IV SHARES The number of shares of stock is:				
MM 100				
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	<b>5</b> •• • • • •	, <b>t</b>	•	
List name(s), address(es) and specific title(s):				
Waverly Ernst DONNA ERNST 12780 AW 35th St 12780 NW 35th S	4			
OCALA, FL 34482 OCALA, FL 341				.* .
PRESIDENT VICE PRESIDE				
ARTICLE VI REGISTERED AGENT				
The name and Florida street address (P.O. Box NOT acceptable) of t	he registered age	at is:		
Waverly Ernst				
12780 Dw 351n St.				
OCALA FL 34482				
ARTICLE VII INCORPORATOR			* -	
The <u>name and address</u> of the Incorporator is:				
Waverly Ernst				
12780 NW 35+1 St	•			
OCATA FL 34488	****	*****	****	c șic
Having been named as registered agent to accept service of process for the above :			lesignated in	this
certificate, I am familiar with and accept the appointment as registered agent and ag	ree to act in inis cap 1	acny 1		
long of Armot	7/2	0/04		
Signature/Registered Agent		Date		
$( \cap \cap \cap )$	. 1	1		
10 to a 1 MA 1 -14	. I -			
Uller Aust	7/2	0/04	·	
Signature/Incorporator		0/04 Date		

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