

PO4000129564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

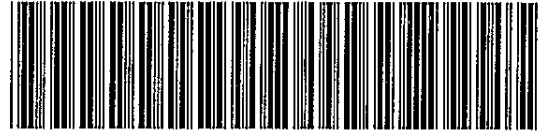
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04 SEP 14 PM 1:52
TALLAHASSEE, FLORIDA

TS9/14/04

TRANSMITTAL LETTER

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

SUBJECT: Seed - Grow, 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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Robert C. Poor
Name (Printed or typed)

#5 Seafares
Address

Ormond-By-the-Sea, Florida 32176
City, State & Zip

386-441-4777
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:

Seed - Grow, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2515 West Moody Boulevard/ Mailing address #5 Seafares
Flagler Beach, Florida 32136 Ormond-By-The-Sea, Florida 32176

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Operation of a bar

ARTICLE IV SHARES

The number of shares of stock is:

10 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Robert C. Poor- President, Vice President, Treasurer & Secretary
#5 Seafares
Ormond-By-The-Sea, Florida 32176

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

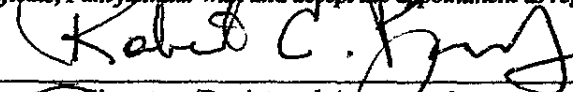
Robert C. Poor
#5 Seafares
Ormond-By-The-Sea, Florida 32176

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert C. Poor
#5 Seafares
Ormond-By-The-Sea, Florida 32176

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 Robert C. Poor

9/10/04

Date



Signature/Incorporator Robert C. Poor

9/10/04

Date

04 SEP 14 PM 1:52
CLERK
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA