

PG 4800135874

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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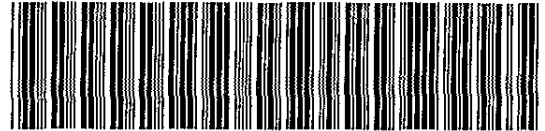
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9-29-04
WR

TRANSMITTAL LETTER

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

SUBJECT: Snapper Management 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: David McDonald jr.
Name (Printed or typed)

1393 Sw 1st Street, 200
Address

Miami, Florida 33135
City, State & Zip

(305) 643-5313
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:

Snapper Management Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6278 North Federal Highway #437
Fort Lauderdale, Florida 33308-1916

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Normal Business Activities.

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):

Stewart O'Connor (Director)
6278 North Federal Highway #437
Fort Lauderdale, Florida 33308-1916

ARTICLE VI REGISTERED AGENT

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

David M. McDonald
1393 SW 1st Street, Suite 200
Miami, Florida 33135

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Stewart O'Connor
6278 North Federal Highway #437
Fort Lauderdale, Florida 33308-1916

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



Signature/Incorporator

9-22-04

Date



Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA