## 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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02/22/05--01026--020 \*\*78.75

05 FEB 22 FE 1: 04 SECRETARY OF STATE DIVISION OF CHARLON AND ANASSEE, FLORIDA



## TRANSMITTAL LETTER

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

SUBJECT:	PIONEER	TIMES	<del></del>	
-	(PROPOSED CO	ORPORATE NAME – <u>MUS</u>	TINCLUDE SUFFIX)	_

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

\$70.00 \$78.75 \$87.50 \$87.50
Filing Fee Filing Fee & Filing Fee, & Certificate of Status

Certificate of Status

\*\*ADDITIONAL COPY REQUIRED\*\*

FROM: NELSON A. PRYOR Name (Printed or typed)		
315	S.E. PINCKNEY St. #7	
	ADISON, FL. 32340	
(85	City, State & Zip  973 - 678 2  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: PIONEER +IMES, INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 315 S.E. PINCKNEY St., #7 MADISON, FL. 32340 ARTICLE III PURPOSE The purpose for which the corporation is organized is: NEWSPAPERC ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): NELSONA. PRYOR, PUBLISHER/President 315 SE PINCKNEY ST #7 Madison, FL 32340 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: NELSON A. PRYOR 315 S.E. PINCKNEY St., II 7 NADISON, FL. 32340 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: NELSON A. PRYOR 7 315 SE P.NCKney St #7 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