

P05000040106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900048029729

03/10/05--01020--007 \*\*78.75

FILED

05 MAR 10 PM 3:27

RECEIVED  
FEB 10 2005  
FALLS CHURCH, VA

CF 3-11

## TRANSMITTAL LETTER

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

SUBJECT: GOLDEN GAIT EQUESTRIAN CENTER, 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 Filing Fee  
☐ \$78.75 Filing Fee  
& Certificate of Status

☒ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: LILIANE BRUNS  
Name (Printed or typed)  
2280 SHOTGUN ROAD  
Address  
DAVIE, FLORIDA 33326  
City, State & Zip  
954-423-8001  
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:

GOLDEN GAIT EQUESTRIAN CENTER, INC

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2280 SHOTGUN ROAD  
DAWIE FLORIDA 33326

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HORSE BREEDING, BOARDING AND EQUESTRIAN CENTER

### 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):

LILIANE BRUNS (PRESIDENT, SECRETARY, TREASURER)  
2280 SHOTGUN RD  
DAWIE FL, 33326

### ARTICLE VI REGISTERED AGENT

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

LILIANE BRUNS  
2280 SHOTGUN RD  
DAWIE, FL. 33326

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LILIANE BRUNS  
2280 SHOTGUN RD.  
DAWIE, FL 33326

\*\*\*\*\*

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

Liliane Bruns  
Signature/Registered Agent

3/07/05  
Date

Liliane Bruns  
Signature/Incorporator

3/07/05  
Date

FILED  
05 MAR 10 PM 3:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA