

**PO500068534**

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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2005 MAY 10 A 9:11  
S. B. WHITE, JR. CLERK  
TALLAHASSEE, FLORIDA

**FILED**

## TRANSMITTAL LETTER

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

**SUBJECT: SPELLBOUND FARMS INC.** *EIN 20-2638535*  
**(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      & Certificate of  
                    Status      Status  
**ADDITIONAL COPY REQUIRED**

FROM: PETRA M. WILDER  
Name (Printed or typed)

17090 55<sup>th</sup> PLACE  
Address

McALPIN, FL 32062  
City, State & Zip

(386) 697-4931  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

April 15, 2005

PETRA M. WILDER  
17090 55TH PLACE  
MCALPIN, FL 32062

SUBJECT: SPELLBOUND FARMS INC.  
Ref. Number: W05000019282

We have received your document for SPELLBOUND FARMS 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 contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6933.

Dale White  
Document Specialist  
New Filings Section

Letter Number: 705A00026033

Enclosed is the requested document.

I hope, this will satisfy all necessary requirements.

Thank you for your help.

Sincerely,  
Petra M. Wilder,

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

### ARTICLE I NAME

The name of the corporation shall be:

SPELLBOUND FARMS INC.

2005 MAY 10 A 9:12

CLERK'S OFFICE OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2109 W US Hwy 90 Suite 170-107  
LAKE CITY, FL 32055

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HORSE FARM & TRAINING

### ARTICLE IV SHARES

The number of shares of stock is:

1,000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PETRA M. WILDER, PRESIDENT & CEO  
17090 55th PLACE  
McALPIN, FL 32062

### ARTICLE VI REGISTERED AGENT

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

PETRA M. WILDER  
17090 55th PLACE  
McALPIN, FL 32062

I hereby am familiar with and accept the  
duties and responsibilities of Registered Agent

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PETRA M. WILDER  
17090 55th PLACE  
McALPIN, FL 32062

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

Petra M. Wilder

Signature/Registered Agent

05-04-05

Date

Petra M. Wilder

Signature/Incorporator

04-07-05

Date