

P05000105669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

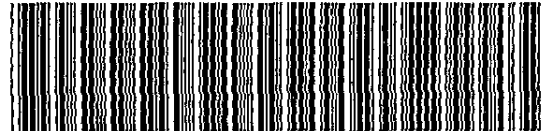
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

7/29/05
BWK

TRANSMITTAL LETTER

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

SUBJECT: _____

COPLAND ENTERPRISES, 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: _____

GAVIN B BRUCE

Name (Printed or typed)

4630 5th AVENUE S.W.

Address

NAPLES FL 34119

City, State & Zip

239. 304. 1250

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:

COPLAND ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4630 5TH AVENUE SW.
NAPLES, FL, 34119

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PERFORM ALL LEGAL PURPOSES AND ENGAGE IN THE TRANSACTION OF ANY AND ALL LAWFUL BUSINESS FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER THE FLORIDA GENERAL CORPORATION ACT.

ARTICLE IV SHARES

The number of shares of stock is:

500 at \$1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

GAVIN B. BRUCE
4630 5TH AVENUE SW.
NAPLES, FL, 34119.

DIRECTOR, PRESIDENT, VICE PRESIDENT, SECRETARY, TREASURER

ARTICLE VI REGISTERED AGENT

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

GAVIN B. BRUCE
4630 5TH AVENUE SW.
NAPLES, FL, 34119

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GAVIN B. BRUCE
4630 5TH AVENUE SW.
NAPLES, FL, 34119

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

Gavin B. Bruce

Signature/Registered Agent

7/22/05
Date

Gavin B. Bruce

Signature/Incorporator

7/22/05
Date

FILED
05 JUL 28 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA