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(Requestor's Name)				
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(Address)				
(Ac	ldress)			
(Ci	ty/State/Zip/Phone	: #)		
				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	Certificates	of Status		
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Special Instructions to	Filing Officer:			
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SLOREIARY OF STATE

T. Burch AUG

TRANSMITTAL LETTER

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

SUBJECT: Circus	Bar,Inc (PROPOSED CORPORA)	FE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	final and one (1) copy of the artic	eles of incorporation and	l a check for:	
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM: Joe	el Pearson			
	Name (Printed or typed)		TERN TATE OF E
<u> </u>	8 Campbell Court	ddress		· · · · · · · · · · · · · · · · · · ·
!	Palm Coast, Florida 32137	State & Zip		
	386- 4 51-0404			

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

Daytime Telephone number

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:

Circus Bar, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 8 campbell Court, Palm Coast, Florida 32137

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Retail Bar

ARTICLE IV SHARES

The number of shares of stock is: 1000

INITIAL OFFICERS AND/OR DIRECTORS

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

Joel Pearson/President/Treasurer

ARTICLE VI REGISTERED AGENT

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

Joel Pearson 8 Campbell Ct. Palm Coast, Florida 32137

ARTICLE VII **INCORPORATOR**

The name and address of the Incorporator is:

Joel Pearson 8 Campbell Court Palm Coast, Florida 32137

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