

P05000116517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

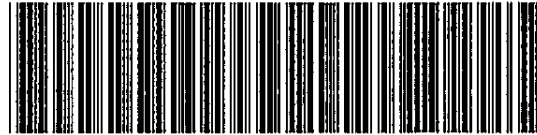
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800058177648

08/22/05--01050--001 **70.00

FILED

05 AUG 22 PM 1:18

SUBMITTING OFFICE
TALLAHASSEE, FLORIDA

RECEIVED

05 AUG 22 PM 1:08

RECEIVING OFFICE
TALLAHASSEE, FLORIDA

8-22-05
5

TRANSMITTAL LETTER

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

SUBJECT: H4 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: Kent Harvey
Name (Printed or typed)

900 Ridge Road
Address

Monticello FL 32344
City, State & Zip

850-997-5381
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: **H4 Enterprises Inc.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: **900 Ridge Rd.
Monticello FL 32344**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is: **10**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

~~Kent Harvey~~
**Kent Harvey CEO
900 Ridge Rd.
Monticello FL 32344**

ARTICLE VI REGISTERED AGENT

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

**Kent Harvey
900 Ridge Rd.
Monticello FL 32344**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**Kent Harvey
900 Ridge Rd.
Monticello FL 32344**

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

Kent Harvey

Signature/Registered Agent

Date

Kent Harvey

Signature/Incorporator

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 AUG 22 PM 1:18

FILED