

P05000138118

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

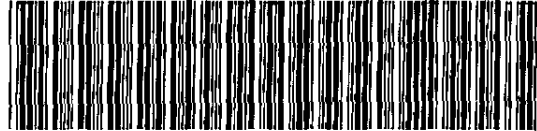
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



500058422115

04/29/05--01047--022 \*\*87.50

FILED

2005 OCT 11 P 12:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10-11-05  
50-11-01  
WCO



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

August 30, 2005

LATRESIA WILSON  
3330 NW 2ND AVE  
OCALA, FL 34475

SUBJECT: SCORPION ENTERPRISES, INC.  
Ref. Number: W05000040688

We have received your document for SCORPION ENTERPRISES, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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) 245-6925.

Cynthia Blalock  
Document Specialist  
New Filings Section

Letter Number: 205A00054567

## TRANSMITTAL LETTER

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

SUBJECT: Scorpion 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: Latresia Wilson  
Name (Printed or typed)

3330 NW 2nd Ave  
Address

Ocala, FL 34475  
City, State & Zip

352-861-6209  
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:

ScorpiLaw Enterprises, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

3330 NW 2nd Avenue, Ocala, FL 34475

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To engage in various legal and profit producing ventures not limited to magazine and directory publishing; website design; computer programming; software development; athletic apparel and equipment retail and development (import); real estate development and investments; golf association development.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000 shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Latresia Wilson  
3330 NW 2nd Ave, Ocala, FL 34475  
President

**ARTICLE VI REGISTERED AGENT**

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

Latresia Wilson  
3330 NW 2nd Ave, Ocala, FL 34475

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Latresia Wilson  
3330 NW 2nd Ave, Ocala, FL 34475

\*\*\*\*\*  
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

8-25-05

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

8-25-05

\_\_\_\_\_  
Date

FILED  
2005 OCT 11 P 12:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA