

PO5000158535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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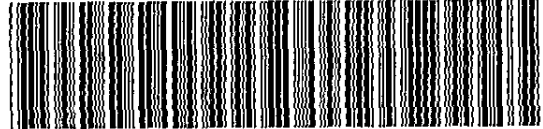
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 DEC -5 PM 12:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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05 DEC -5 PM 12:37

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: THE SIGHTS AND SOUNDS COMPANY 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: JONATHAN D. SHEPPARD
Name (Printed or typed)

635 WAKULLA AVE
Address

CRAWFORDVILLE, FL 32327
City, State & Zip

850-251-0311
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:

THE SIGHTS AND SOUNDS COMPANY OF WAKULLA INC.
EFFECTIVE JAN. 1 2006

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

635 WAKULLA AAVAN RD
CRAWFORDVILLE, FL 32327

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ELECTRONICS RETAIL

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JONATHAN SHEPPARD 21 CALVARY CT CRAWFORDVILLE, FL 32327 (PRESIDENT)
KAROLYN SHEPPARD 21 CALVARY CT CRAWFORDVILLE, FL 32327 (V. PRESIDENT)

ARTICLE VI REGISTERED AGENT

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

JONATHAN SHEPPARD 21 CALVARY CT CRAWFORDVILLE, FL 32327

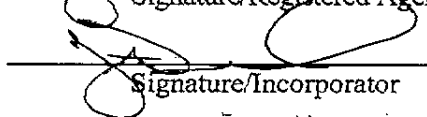
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JONATHAN SHEPPARD 21 CALVARY CT CRAWFORDVILLE, FL 32327

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

12/1/05

Date
12/1/05

Date

FILED
05 DEC -5 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA