Poso00/65/69

(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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ALLAHASSEE, FLORIDA

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212,21

COVER LETTER

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

SUBJECT:	PROPOSED CORPORA	DAY COMP	/	
Enclosed are an orig	inal and one (1) copy of the arti	cles 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	
	Ring	ADDITIONAL CO		
FROM:	PO Box	TONNSON, TO	<u> </u>	
-	Monticello City,	FL. 3234 State & Zip	<u>15</u> 2 445-4848	
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: THE OLDE Way Campany
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: P.O. Box 180124 TALBHASSE, FL. 323/8 - 0/24 ARTICLE III PURPOSE The purpose for which the corporation is organized is: DO BUSINES UNDER THE LAWS of M. U.S. AND Flow
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Bill C. Johnson, JR President ORDER PROPERTY OF THE PROPERT
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: BILL C. TONNSON, TR 252 Cox RODD, Ste 100, Mon ticello, FL. 32344
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: BILL C. JONNEW, TR. PO TSOY 387, Monticello, FL. 32345 ***********************************
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 12 2 D Signature/Incorporator Date Da