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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

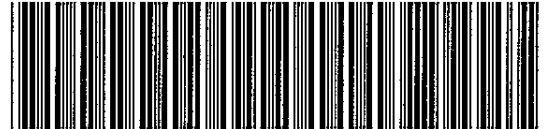
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

J. Shivers JAN 25 2005

COVER LETTER

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

SUBJECT: Taunton Publishing, 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: David L. Taunton

Name (Printed or typed)

P.O. Box 870

Address

Wewahitchka, FL 32465

City, State & Zip

(850)639-2337

Daytime Telephone number

06 JAN 20 PM 1:37
SECRETARY OF STATE
TALLAHASSEE, FL 32314

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:

Taunton Publishing, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

702 N. Hwy. 71, P.O. Box 630, Wewahitchka, FL 32465

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To publish books and other literature.

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):

David L. Taunton, P.O. Box 870, Wewahitchka, FL 32465, President

Abigail J. Taunton, P.O. Box 870, Wewahitchka, FL 32465, Vice President

Abigail J. Taunton, P.O. Box 870, Wewahitchka, FL 32465, Sec/Treas.

ARTICLE VI REGISTERED AGENT

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

David. L. Taunton, 200 Taunton Family Road, Wewahitchka, FL 32465

ARTICLE VII INCORPORATOR

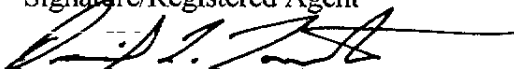
The name and address of the Incorporator is:

David L. Taunton, P.O. Box 870, Wewahitchka, FL 32465

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

1-5-06

Date

1-5-06

Date

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TALLAHASSEE FLORIDA