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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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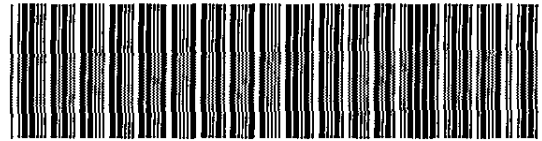
(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch MAR 1 2006

## TRANSMITTAL LETTER

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

SUBJECT: S & S Whitetail Galore 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: John L Shadd

Name (Printed or typed)

Post Office Box 506

Address

Lake Butler, Florida 32054

City, State & Zip

386-496-2631

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:

S & S Whitetail Galore Inc

## **ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailling address is:

Post Office Box 506

Lake Butler, Florida 32054

## **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

Raising, buying and selling whitetail deer

## **ARTICLE IV      SHARES**

The number of shares of stock is:

500 Shares at \$ 1.00 Par Value

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

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

John L Shadd

Billy Joe Sage, Jr.

Both at Post Office Box 506, Lake Butler, Florida 32054

## **ARTICLE VI      REGISTERED AGENT**

The name and Florida street address of the registered agent is:

Carita S Emery

9678 SW State Road 121, Lake Butler, Florida 32054

## **ARTICLE VII      INCORPORATOR**

The name and address of the Incorporator is:

John L Shadd

Post Office Box 506, Lake Butler, Florida 32054

\*\*\*\*\*

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

Carita S Emery  
Signature/Registered Agent

2/22/06  
Date

John L Shadd  
Signature/Incorporator

2/22/06  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA