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# **COVER LETTER**

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

SUBJECT: Storm Shelters of Northwest Florida, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  OPY REQUIRED
FROM: Holly Julian Name	(Printed or typed)	
3003 Woodymarion D	rive	
	Address	·
Chipley, FL 32428	State & Zip	
Chy,	oaw & Esp	
(850) 258-2756	*-1	
Daytime i	elephone number	

NOTE: Please provide the original and one copy of the articles.

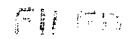
# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

# ARTICLE I NAME

The name of the corporation shall be:

Storm Shelters of Northwest Florida, Inc.



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SECRETARY OF STATE FALLAHASSEE FLORIDA

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1011 John Walker Drive Panama City, FL 32409

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO SELL AND
Install storm shelters

# ARTICLE IV SHARES

The number of shares of stock is: 100 shares

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Darby Gay, President - 1011 John Walker Drive, Panama City, FL 32409 (25 shares of stock) Kevin Julian, Vice-President - 3003 Woodymarion Drive, Chipley, FL 32428 (25 shares of stock) Shannon Gay, Secretary - 1011 John Walker Drive, Panama City, FL 32409 (25 shares of stock) Holly Julian, Treasurer - 3003 Woodymarion Drive, Chipley, FL 32428 (25 shares of stock)

### ARTICLE VI REGISTERED AGENT

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

Shannon Gay 1011 John Walker Drive Panama City, FL 32409

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Holly Julian 3003 Woodymarion Drive Chipley, FL 32428

Having been no	amed as registered agei	nt to accept service of p	rocess for the above stated	l corporation at the	place designated in this
certificate, I am	familiar with and acce	pt the appointment as re	gistered agent and agree t	o act in this capacity	,

Signature/Registered Agent Date

O2/25/2006

Date

O2/25/2006

Date

Date