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15002 02 JUL 2006

COVER LETTER

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

SUBJECT: NEIL ERDMAN EQUINE SERVICES 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: NEIL ERDMAN
Name (Printed or typed)

P.O. Box 361
Address

LOWELL, FLORIDA, 32663
City, State & Zip

352-875-1193.
Daytime Telephone number

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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:

NEIL ERDMAN EQUINE SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 361, LOWELL, FL. 32663

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

EQUINE ACTIVITIES.

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):

NEIL ERDMAN

PRESIDENT / CEO

P.O. Box 361, LOWELL, FL 32663

ARTICLE VI REGISTERED AGENT

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

NEIL ERDMAN

13855 N.W. 27th AVENUE, CITRA, FL 32115

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

NEIL ERDMAN

P.O. Box 361, LOWELL, FL 32663.

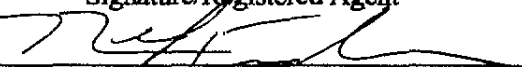
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

March 16/06

Date



Signature/Incorporator

March 16/06

Date

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