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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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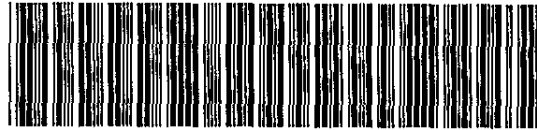
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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we

COVER LETTER

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

SUBJECT: ShaKaRee Enterprises, 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: Pamela J. Hanson

Name (Printed or typed)

9330 Woodview Drive

Address

Polk City, FL 33868

City, State & Zip

863-984-9709

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:

ShKaRee Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9330 Woodview Drive, Polk City, FL 33868

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any legal business purpose allowed a Florida Professional Corporation

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Pamela J. Hanson, President/Treasurer
9330 Woodview Drive Polk City, FL 33868

Richard Hanson, Vice President
9330 Woodview Drive Polk City, Florida 33868

ARTICLE VI REGISTERED AGENT

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

Pamela J. Hanson
9330 Woodview Drive
Polk City, FL 33868

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Pamela J. Hanson
9330 Woodview Drive
Polk City, FL 33868

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

Pamela J. Hanson

Signature/Registered Agent

4/30/2006

Date

Pamela J. Hanson

Signature/Incorporator

4/30/2006

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 MAY -3 P 1:20

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