

PO6000104650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

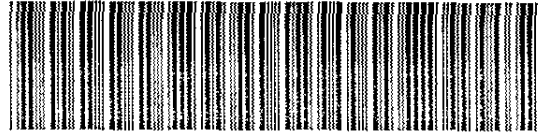
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: Ocala Sales 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: Robert H. SPENA
Name (Printed or typed)

1949 N.W. 80th AVE
Address

Ocala FL. 34482-4409
City, State & Zip

352-266-0679
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:

Ocala Sales Enterprises Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1949 NW. 80th AVE
OCALA FL 34482-4409

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any LEGAL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

400

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PRES. ROBERT H. SPENA - 1949 N.W. 80th AVE. OCALA FL. 34482-4409
V.P. BETTY JO CALDWELL 3628 HERMITAGE RD. E JAX FL
32277

ARTICLE VI REGISTERED AGENT

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

ROBERT H. SPENA - 1949 N.W. 80th AVE. OCALA FL. 34482-4409.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT H. SPENA
1949 NW 80th AVE
OCALA SALES #34482-4409

PLEASE MAKE EFFECTIVE
Corporation date 8/01/06



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

Date

Signature/Incorporator

Date