

POL000122156

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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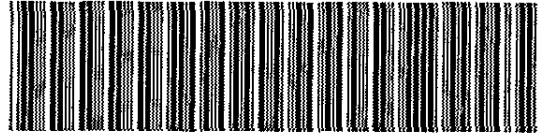
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

fa

COVER LETTER

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

SUBJECT: HOEHN-SOLGAN INVESTMENTS, INCORPORATED
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: MARC ADAM SOLGAN
Name (Printed or typed)

12 BLACK WATER WAY
Address

ORMOND BEACH, FLORIDA 32174
City, State & Zip

386-682-5035
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:

HOEHN-SOLGAN INVESTMENTS INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

787 N.E. 5TH ST.
CRYSTAL RIVER,FLORIDA 34429

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO OPERATE AMERICAN TRADING POST PAWN COMPANY

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):

MARC A. SOLGAN AND BRICKETTE L. SOLGAN
12 BLACK WATER WAY ORMOND BEACH,FLORIDA 32174
DAVID L. HOEHN AND ELAINE K. HOEHN
10 SPANISH PINE WAY
ORMOND BEACH, FLORIDA 32174

ARTICLE VI REGISTERED AGENT

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

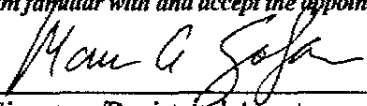
MARC A. SOLGAN
12 BLACK WATER WAY
ORMOND BEACH, FLORIDA 32174

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARC A. SOLGAN
12 BLACK WATER WAY
ORMOND BEACH, FLORIDA 32174

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

09-18-2006

Date



Signature/Incorporator

09-18-2006

Date

FILED
06 SEP 22 AM 2:00
SECRETARY OF STATE
ATLANTA, GEORGIA
FLORIDA