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COVER LETTER

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

SUBJECT:	Macalo E. (PROPOSED CORPORA)	terpris	e Inc.
Enclosed are an orig	ginal and one (1) copy of the artic	les of incorporation and	a check for:
∑ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	Ashlie T.	ADDITIONAL CO	
	P.O. Box &	25 3 ddress	- ·
(_ > _	atka, F State & Zip	L 32/3/
(386)325	-3889/	386)246,0100

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

ARTICLES OF INCORPORATION The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation: ARTICLE I - CORPORATE NAME The name of the corporation is: ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law. ARTICLE III - PURPOSE The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida. 8 ARTICLE IV - CAPITAL STOCK ARTICLE V - INITIAL PRINCIPAL OFFICE The street address of the initial principal office and, if different, the mailing address is: STREET ADDRESS **FLORIDA** Mailing address, if different STREET ADDRESS ZIP **FLORIDA** ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT The street address of the initial registered office and the name of the initial registered agent at the office is: NAME

anc

FLORIDA

ADDRESS

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have(The number of directors may be
addresses of the initial director(s) of the corporation are as for		nan one (1). The names and
NAME Ashlie T. Hansbor	1	
ADDRESS P.O. BOY 253		
CITY East Palatta	STATE FL	ZIP 32/3/
NAME Matthew A. Hensi	Brd	
ADDRESS P. B. BOX 253		
CITY East Palatha	STATE FL	ZIP32/3/
NAME		
ADDRESS		
CITY	STATE	ZIP
ARTICLE VIII	- INCORPORATORS	
The names and addresses of the incorporators signing these A		as follows:
NAME Ashlie T. Hansfor	1	
ADDRESS P. O. BOX 253		
CITY Kast Palatka	STATE F	ZIP 32/3/
NAME Matthew A. Haus	Perod	
ADDRESS P. D. BOX 253		·
CITY East Paletha	STATE FC	ZIP <i>3</i> 2/3/
NAME		,
ADDRESS		
CITY	STATE	ZIP
The undersigned incorporator(s) have executed these A	rticles of Incorporation thi	s /5+
day of Ahgust	<u> 2001</u> .	<u> </u>
	Min Tola	wahaa L
-	7164111 1-1111	(Signature)
The second secon	Natta A. Va	(Signature)
		(Signature)
-		/8

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

,	Macalo	Enterprise Inc.	
	• •	(name of corporation)	

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at _ <i>13</i>	1 Da	k 4	n ROCK	Lane		
Fa	BH	Pala	etha	, FC.	32131	
has name	d H	shic	7-	Hanst	rd	

located at the aforesaid address, as its registered agent to accept service of process within this state.

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature) Signature) Signature)