

PO7000092638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

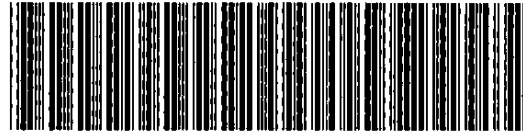
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000107038820

08/17/07--01026--009 \*\*70.00

CLERK OF SUPERIOR COURT  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

07 AUG 17 PM 1:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 AUG 17 PM 1:53

FILED

8/17/07

COVER LETTER

FILED

07 AUG 17 PM 1:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

JOHN  
SUBJECT: MORGAN HOLDINGS CO  
(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: T. FIEDLER  
Name (Printed or typed)

505 E NEW YORK AVE  
Address

DELAND FL 32724  
City, State & Zip

386 734 4215  
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:

JOHN  
MORGAN HOLDINGS CO.

**FILED**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

P.O. BOX 24 505 E NEW YORK AVE  
DELAND, FL 32721

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY LAWFUL ACTIVITY

**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):

**ARTICLE VI REGISTERED AGENT**

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

TIMOTHY R. FIEDLER  
505 E. NEW YORK AVE SUITE 2  
DELAND, FL 32724

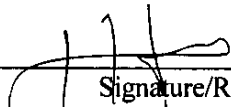
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

TIMOTHY R. FIEDLER  
505 E. NEW YORK AVE SUITE 2  
DELAND, FL 32724

\*\*\*\*\*

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

8/17/2007  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

8/17/2007  
\_\_\_\_\_  
Date