P07000098649

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800107665278

09/04/07-01097-003 **78.75

SECRETAN OF STATE



COVER LETTER

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

SUBJECT: Gene	e & Jo's Flyers, Inc.			
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the artic	eles of incorporation and	l a check for:	
		neo or meorporation and		
▼ \$70.00	\$78.75	₹78.7 5	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
		!	& Certificate of Status	
		ADDITIONAL CO		
	,			
FROM: C	arol Ann Volini, Esq.			
	Name (Printed or typed)		
	AA C E First Avenue Cuite	202		
	44 S.E. First Avenue, Suite	ddress		
	•	idai 633		
	Ocala, FL 34471			
		State & Zip		
	352-867-0016			
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:

GENE & JO'S FLYERS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

15200 S.E. 36th Avenue Summerfield, FL 34491

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Agricultural [raise and sell birds, goats, and llamas]

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):

Joann Callas 15200 S.E. 36th Avenue Summerfield, FL 34491 President, Secretary, Treasurer

SECRETAIN OF STATE

APPROVED FILED

ARTICLE VI REGISTERED AGENT

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

Carol Ann Volini, Esq. 44 S.E. First Avenue, Suite 303 Ocala, FL 34471

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Carol Ann Volini, Esq. 44 S.E. First Avenue, Suite 303 Ocala, FL 34471

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

When Value

Mark Comment (Mark Comment)

Signature/Incorporator

8-28-07 Date

8-28-07

Date