

P07000126394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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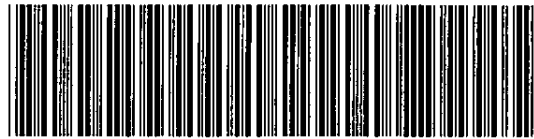
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: SHABDUE RELIABLE FARMS, 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: SHABDUE RELIABLE FARMS, INC.

Name (Printed or typed)

P. O. BOX 551

Address

CRESCENT CITY FL 32112

City, State & Zip

386-698-1856

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:

SHABDUE RELIABLE FARMS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:
512 NORTH PROSPECT, CRESCENT CITY, FL 32112;
P. O. BOX 551, CRESCENT CITY, FL 32112;

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
GROW AND SALE OF ORNAMENTAL GREENS

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARY LYN SHABDUE, P. O. BOX 551
CRESCENT CITY, FL 32112

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

LINDA GAYLE WALLACE, 512 N. PROSPECT STREET, CRESCENT CITY, FL 32112

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

MARY LYN SHABDUE, P. O. BOX 551, CRESCENT CITY, FL 32112

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

11-20-07
Date


Signature/Incorporator

11-20-07
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA