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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETANT OF STATE

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TRANSMITTAL LETTER

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

UBJECT: Good Me	asure of North	Florida, Inc.	
nclosed is an origina	l and one (1) co	py of the articles of i	ncorporation and a check for
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee Certified Copy & Certificate
FR	OM: <u>Luca</u>	s R. Smith Name (printed or typed	i) .
	14895	5 S.E. 95 th Street	
		Address	**************************************
·	Whit	e Springs, Fl. 32096 City, State & Zip	-2419
	386-5	90-4480	
		Daytime Telephone Nu	mber

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

ARTICLES OF INCORPORATION.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Good Measure of North Florida, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business address of this corporation shall be:

14895 S.E. 95TH STREET WHITE SPRINGS, FL. 32096-2419

The principal mailing address of this corporation shall be: 14895 S.E. 95TH STREET WHITE SPRINGS, FL. 32096-2419

SECRETARY OF STATE TALLAHASSEE, FLORIDA



ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 SHARES PAR VALUE \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LUCAS R. SMITH 14895 S.E. 95TH STREET WHITE SPRINGS, FL. 32096-2419

ARTICLE V INCORPORATOR(S)

The name(s) and street addresses of the incorporator(s) to these Articles of Incorporation are:

PRESIDENT/DIRECTOR	VICE-PRESIDENT
Lucas R. Smith	James E. Smith III
14895 S.E. 95 TH STREET	8892 135 TH ROAD
White Springs, Fl. 32096	Live Oak, Fl. 32060

ARTICLE VI NATURE OF BUSINESS

The general nature of business of this corporation is to transact any and all lawful business.

The undersigned incorporators have executed these Articles of Incorporation this

<u>1st</u> day of <u>April</u>, <u>2008</u>

Laus R. Signature

James & Smith

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The r	name of the con	poration is:	Good Measure	of North Florid	a, Inc.
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2. The name and address of the registered agent and office is:

Lucas R. Smith	_		
(Name)	SEC	08 AP	~
14895 S.E. 95 th Street	HAS I	≂ŏ 1	7. 7
(P.O. Box <u>not</u> acceptable)	SH C	7	后表
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White Springs, FL. 32096-2419	_ <u>S</u>	\sim	•
(City/State/Zip)	図出	ÇO.	

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)

4-1-08
(Date)