## P08000052245

<b>.</b>				
(Requestor's Name)				
(Address)				
(Address)				
,				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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05/23/08--01040--005 \*\*70.00

2000 MAY 23 PM 1: 05
SECRETARY OF STATE

cf.5.28

## **COVER LETTER**

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

SUBJECT: O	rchid Island	d Distribu	tors, IN	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy		
	,	ADDITIONAL COPY REQUIRED		
FROM: DAWN MAXWe 11 Name (Printed or typed)				
	555 39th Ct			
NERO BEACH FL 3296.				
772.299-0434  Daytime Telephone number				
		•		

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

## FILED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

2000 MAY 23 PM 1: 05

ARTICLE I

The name of the corporation shall be:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Orchid Island Distributors INC

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

555 39th C+ VERO BEACH FL 32968

<u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is:

The general Character purpose, and the nature of business to be transacted. By this corporation is to carryon in any capacity ARTICLE IV SHARES any business or trade deemed legal in the state of The number of shares of stock is:

100

INITIAL OFFICERS AND/OR DIRECTORS

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

Dawn Maxwell, 555 3944 Ct, Vero Beach FL 32968 - President Kenneth Maxwell, 555 394hCt, Vero Beach FL 32968 Vice President

ARTICLE VI REGISTERED AGENT

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

Dawn Maxwell

Naux Maxwell

555 3944 CF

Vero Beach FL 32968

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dawa Maxwell

Dawn Maxwell

555 3944 CF Ven Beach FL 32968

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I fim familiar with and accept the appointment as registered agent and agree to act in this capacity

> DAWN Maxwell Date
>
> 5-2008
>
> 5-2008
>
> Date
>
> Date Signature/Registered Agent