

PO8099968502

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

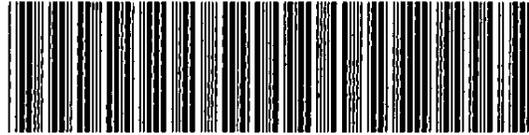
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: ~~XXXXXXXXXXXXXXXXXXXX~~ 5K Horse Transport, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

- | | | | |
|---|---|--|---|
| <input checked="" type="checkbox"/> \$70.00
Filing Fee | <input type="checkbox"/> \$78.75
Filing Fee
& Certificate of Status | <input type="checkbox"/> \$78.75
Filing Fee
& Certified Copy | <input type="checkbox"/> \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status |
|---|---|--|---|
- ADDITIONAL COPY REQUIRED**

FROM: Melissa Montgomery
Name (Printed or typed)

PO Box 67
Address

Earleton, FL 32631
City, State & Zip

(352) 468 2321 cell (352) 514-4883
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:

~~5K Horse Transport, Inc.~~

5K Horse Transport, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Street: 20310 NE 102 Place
Earleton, FL 32631

Mail: PO Box 67
Earleton, FL 32631

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Transport for profit of horses

ARTICLE IV SHARES

The number of shares of stock is:

2 @ .001

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President: Henry Montgomery

Vice President and Agent: Melissa Montgomery

ARTICLE VI REGISTERED AGENT

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

Melissa Montgomery
PO 20310 NE 102 Place
Earleton, FL 32631

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Melissa Montgomery
PO box 67
20310 NE 102 Place Earleton, FL 32631

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

Melissa Montgomery, Vice President / Agent
Signature/Registered Agent

7/12/08
Date

Melissa Montgomery
Signature/Incorporator

7/12/08
Date

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TALLAHASSEE, FLORIDA