

P08000075568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

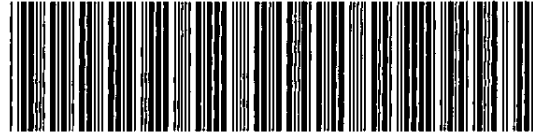
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400134306534

08/13/08--01015--010 \*\*87.50

FILED  
08 AUG 13 AM 6:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*

## COVER LETTER

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

**SUBJECT:** GINKGO ENTERPRISES, 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:** Leland Owens

Name (Printed or typed)

2040 SE 19th Street

Address

Lauderdale-By-The Sea, Florida 33062

City, State & Zip

(954) 614-0101

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:

GINKGO ENTERPRISES, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

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

2040 SE 19th Street  
Lauderdale-By-The Sea, Florida 33062

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Health Care, Waste Solutions, Ecology, Humanitarian Projects, Education Advancement, Real Estate, Aviation, Agriculture, Horticulture, Charities, And, The Performing & Visual Arts.

### **ARTICLE IV SHARES**

The number of shares of stock is:

1001 Shares

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Leland Owens, Director  
Daniel Copher, Director

### **ARTICLE VI REGISTERED AGENT**

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

Leland Owens  
2040 SE 19th Street  
Lauderdale-By-The Sea, Florida 33062

### **ARTICLE VII INCORPORATOR**

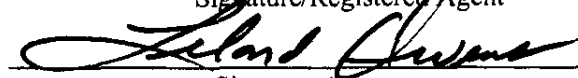
The name and address of the Incorporator is:

Leland Owens  
2040 SE 19th Street  
Lauderdale-By-The Sea, Florida 33062

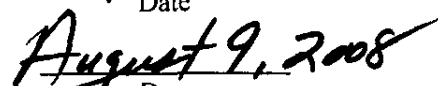
\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Date

FILED  
08 AUG 13 AM 6:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA