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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
. (Bu	siness Entity Nar	ne)
· (Do	cument Number)	
Certified Copies	_ Certificates	of Status <u>**</u>
Special Instructions to	Filing Officer:	
	Office Use on	ly
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COVER LETTER

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

SUBJECT:	Hammer Adventures,			
Enclosed are an original	(PROPOSED CORPORA	TE NAME - MUST INCI		
\$70.00 Filing Fee	✓ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:		Boatenhammer (Printed or typed)		
	7243 Stanford Dr. Address			
-	Lakeland, FL 33809 City, State & Zip			
-	863-868-6605 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:

Hammer Adventures, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is:

7243 Stanford Dr., Lakeland, FL 33809

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

ARTICLE IV **SHARES**

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

James Boatenhammer - 7243 Stanford Dr., Lakeland, FL 33809. President

ARTICLE VI REGISTERED AGENT

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

Corporation Service Company - 1201 Hays Street, Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: James Boatenhammer - 7243 Stanford Dr., Lakeland, FL 33809

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 Agen