(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:  ANA Chan S. Sheppard  AUTHORIZATION BY PHONE TO	mRI
DATE 7/29/10 DOC MINES	11111





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# **COVER LETTER**

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

SUBJECT: The Sign	its and Sounds Company of Nort	h Florida ///٤.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original	inal and one (1) copy of the arti	cles of incorporation and	a check for:
☐ \$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 PPY REQUIRED
FROM: Jon	athan D. Sheppard Name	(Printed or typed)	
21 (	Calvary Ct		
Crav	vfordville, FL 32327	Address State & Zip	
850-	926-5092 Daytime T	elephone number	·
thesi	neppard@earthlink.net E-mail address: (to be use	for future annual report t	notification)

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)

10 JUL 27 PM 2: 55

SECRETARY OF STATE TALL AHASSEE FLORIDA

#### ARTICLE I NAME

The name of the corporation shall be:

The Sights and Sounds Company of North Florida Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 635 Wakulla Aaran Rd
Crawfordville, FL 32327

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Electronics Retail

#### 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):

Jonathan D.

President

Sheppard

#### ARTICLE VI REGISTERED AGENT

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

Jonathan D. Sheppard 21 Calvary Ct Crawfordville, FL 32327

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Jonathan D. Sheppard 21 Calvary Ct Crawfordville, FL 32327

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

7-26-10 Date

7-26-10

Date