

P110000017166

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MRS 2/18

## COVER LETTER

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

SUBJECT: EXQUISITE EQUESTRIAN 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: STEPHEN SPRATT  
Name (Printed or typed)  
1024 GLENRAVEN LANE  
Address  
CLERMONT, FL, 34711  
City, State & Zip  
407-738-6222  
Daytime Telephone number  
SPRATT5430@aol.com  
E-mail address: (to be used for future annual report 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)

## ARTICLE I . NAME

The name of the corporation shall be: EXQUISITE EQUESTRIAN ENTERPRISES INC

## ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1024 GLENRAVEN LANE  
CLERMONT, FL, 34711

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HORSE BREEDING AND TRAINING

## ARTICLE IV SHARES

The number of shares of stock is: 100 (ONE HUNDRED)

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: STEPHEN SPRATT - DIRECTOR

Address: 1024 GLENRAVEN LANE  
CLERMONT, FL, 34711

Name and Title:

Address:

Name and Title: MR J VEGA - SECRETARY

Address: 5430 DAHLIA RESERVE  
KISSIMMEE, FL, 34758

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

## ARTICLE VI REGISTERED AGENT

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

Name: MARIE SPRATT

Address: 1024 GLENRAVEN LANE  
CLERMONT, FL, 34711

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: STEPHEN SPRATT

Address: 1024 GLENRAVEN LN  
CLERMONT, FL, 34711

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

  
Required Signature/Registered Agent

2/14/11  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
Required Signature/Incorporator

2/14/11  
Date

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA