## P11000017595

(Requestor's Name)
(Address)
(Addiess)
(Address)
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(December A News Lea 2)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE

MRS 2/21

## **COVER LETTER**

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

₹, ₹

SUBJECT:	Corbett's Farm, Inc.				
(PROPOS	ed CORPORATE NAME - MUST INCLUDE SUFF				
\$70.00 \$78.75 Filing Fee & Certificate of	\$78.75 \$87.50  of Status & Certified Copy Certification	Fee, ed Copy tificate of			
FROM:	Carol M. Corbett  Name (Printed or typed)				
	166 Corbett Lane Address				
Crawfordville, Florida 32327 City, State & Zip					
Daytime Telephone number					
CCorbett@leonarc.com  E-mail address: (to be used for future annual report notification)					

NOTE: Please provide the original and one copy of the articles.





FLORIDA DEPARTMENT OF STATE Division of Corporations

February 9, 2011

CAROL M. CORBETT 166 CORBETT LANE CRAWFORDVILLE, FL 32327

SUBJECT: CORBETT'S FARM, INC.

Ref. Number: W11000007945

We have received your document for CORBETT'S FARM, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 411A00003456

www.sunbiz.org

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the corp	NAME poration shall be: Corbetts PR	oduce, INC	<u>1</u>
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing a	address, if different is:
	166 Corbett Lane	0	·
	awfordville, Florida, 32327		
321			
Corporation is	ich the corporation is organized is: organized to provide the structure t	o run a business in f	arming TARETARY OF STA
			88 P
	NITIAL OFFICERS AND/OR DIRECTOR		
Name and Titl	e:Carol M. Corbett, President	_ Name and Title:	
Address:	166 Corbett Lane	Address:	
	Crawfordville, Florida 32327		
		<u> </u>	
S. Lant.		5.7 + PEN*.1	
	e:William H. Corbett, Jr., Director		
Address:	229 Corbett Lane	Address:	
	Crawfordville, Florida 32327	_	
Nome and Titl	a: Kimbarly C. Nabara, Director	Name and Title	
Address:	e: Kimberly C. Nabors, Director	Address:	
Address:	166 Corbett Lane		
	Crawfordville, Florida 32327		
	REGISTERED AGENT Ida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name:	Carol M. Corbett	_	
Address:	166 Corbett Lane		
	Crawfordville, Florida 32327	_	
ADMINITURE			
	INCORPORATOR		
	ress of the Incorporator is:		
Name:	Carol M. Corbett	<del></del>	
Address:	166 Corbett Lane Crawfordville, Florida 32327	<del>_</del>	
	Clawfordville, Florida 32327	<del></del>	
	l as registered agent to accept service of proces familiar with and accept the appointment as re		
0 . 0	n Call =		2/2/11
_ Caron	M. Collett  Required Signature/Registered Agent		2/7/11
	Required Signature/Registered Agent		Date
document to the Dep	nent and affirm that the facts stated herein are partment of State constitutes a third degree felor	y as provided for in s.817.1	
(pul	m. Carlina		2/7/11
unu	M. Could Required Signature/Incorporator		Date