

P110000064474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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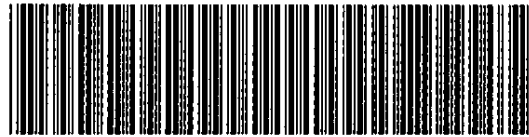
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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07/14/11--01004--002 **70.00

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2011 JUL 14 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FL 32310

SC
7-19-11

COVER LETTER

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

SUBJECT: BESSEMER FARMS 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: BESSEMER FARMS, INC.
Name (Printed or typed)

4312 LAKE GRIFFIN RD.
Address

LADY LAKE, FL. 32159
City, State & Zip

352-235-1123
Daytime Telephone number

schwartzcustom.com
E-mail address: (to be used for future annual report notification)

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

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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: **BESSEMER FARMS, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
4312 LAKE GRIFFIN RD.
LADY LAKE, FL. 32159

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
FARMING

ARTICLE IV SHARES

The number of shares of stock is: **1500**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ADAM SCHWARTZ, PRES.	Name and Title: _____
Address: 4312 LAKE GRIFFIN RD.	Address: _____
LADY LAKE, FL. 32159	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

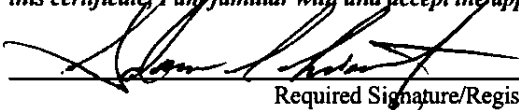
Name: **ADAM SCHWARTZ**
Address: **4312 LAKE GRIFFIN RD.**
LADY LAKE, FL. 32159

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **ADAM SCHWARTZ**
Address: **4312 LAKE GRIFFIN RD.**
LADY LAKE, FL. 32159

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

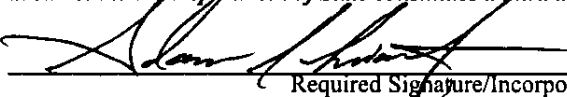


Required Signature/Registered Agent

07-11-11

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

07-11-11

Date

2011 JUL 14 PM 2:30
CLERK OF COURT
DEPARTMENT OF STATE
TALLAHASSEE, FL 32301