

P11000072746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

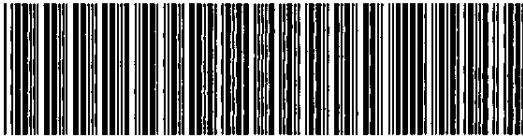
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG 12 PM 1:32

qs 8/10/11

COVER LETTER

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

SUBJECT: Salvation High Performance Fishing Products, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Jeff Wilson
Name (Printed or typed)

10801 Venice Circle
Address

Tampa, FL 33635
City, State & Zip

813-295-7777
Daytime Telephone number

jwilson2001@Tampabay.RR.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: Salvation High Performance Fishing Products, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

12123 Garden Lake Circle
Odessa, FL. 33556

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To invent, manufacture and sell fishing lures, fishing rods,
fishing apparel and other fishing products.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Troy Morgan
Address: 12123 Garden Lake Circle
Odessa, FL. 33556

Name and Title: _____
Address: _____

Name and Title: Jeff Wilson
Address: 10801 Venice Circle
Tampa, FL. 33635

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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ARTICLE VI REGISTERED AGENT

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


Name: Troy Morgan
Address: 12123 Garden Lake Circle
Odessa, FL. 33556

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jeff Wilson
Address: 10801 Venice Circle
Tampa, FL. 33635

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

8/10/11

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.

Jeff Wilson

Required Signature/Incorporator

8/10/11

Date