

711000075314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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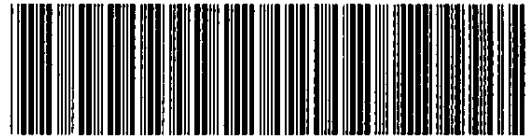
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 23 AM 9:20

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J. Shivers AUG 24 2011
W11-40391
1578

COVER LETTER

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

SUBJECT: SUSAN M 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: **SUSAN F HAMMOND**

Name (Printed or typed)

10154 DUNKIRK RD

Address

SPRING HILL, FL 34608

City, State & Zip

352-684-9099

Daytime Telephone number

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

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

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

AUG 23 AM 9:21

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

SUSAN M ENTERPRISES INC

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

20254 DUNKIRK RD
SPRING HILL, FL 34608

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MANAGE AND INSPECT MARINAS

ARTICLE IV SHARES

The number of shares of stock is:

200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SUSAN F HAMMOND - PRESIDENT

Address: 10154 DUNKIRK RD
SPRING HILL, FL 34608

Name and Title: _____

Address: _____

Name and Title: HENRY BYRON HAMMOND - SECRETARY/TREASURER

Address: 10154 DUNKIRK RD
SPRING HILL, FL 34608

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: SUSAN F HAMMOND

Address: 10154 DUNKIRK RD
SPRING HILL, FL 34608

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SUSAN F HAMMOND

Address: 10154 DUNKIRK RD
SPRING HILL, FL 34608

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

Susan F Hammond

Required Signature/Registered Agent

22 July 2011
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.

Susan F Hammond

Required Signature/Incorporator

22 July 2011
Date

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DEPARTMENT OF STATE
TALLAHASSEE, FL 32399