

P11000096844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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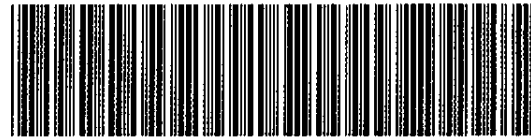
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
11/8

COVER LETTER

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

SUBJECT: Circe Distribution, 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: John Bleecker

Name (Printed or typed)

1350 Wildcat Ridge Road

Address

Watkinsville, GA 30677

City, State & Zip

706-705-4824

Daytime Telephone number

jbleecker@bellsouth.net

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: Circe Distribution, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
3217 White Oak Road
Lorida, FL 33857

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL LEGAL ACTIVITIES.

ARTICLE IV SHARES

The number of shares of stock is: Two thousand (2,000)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
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: Tammie Dallmeyer
Address: 3217 White Oak Road
Lorida, FL 33857

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: John Bleeker
Address: 1350 Wildcat Ridge Road
Watkinsville, GA 30677

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

Tammie Dallmeyer
Required Signature/Registered Agent

11-3-2011

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.

John Bleeker
Required Signature/Incorporator

11-3-2011

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA