

P12000019243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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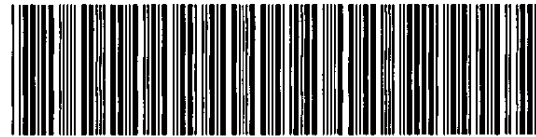
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/27/12--01004--019 **87.50

RECEIVED
DEPARTMENT OF STATE
FILED
12 FEB 27 AM 11:39
12 FEB 27 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 02/27/12

COVER LETTER

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

SUBJECT: Rattler One Foundation 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: DON W. Tolliver
Name (Printed or typed)

P. O. Box 2491
Address

Tallahassee, FL 32316
City, State & Zip

850-339-9311
Daytime Telephone number

Quartress @ G mail. 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:

Rattler One Foundation Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

53 Bridle Gate Dr
Crawfordville, FL
32327

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting Firm, Fundraising

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Don Talliver, CEO
Address: P.O. Box 2491
Tally, FL 32316

Name and Title: _____
Address: _____

Name and Title: Wayne S. Talliver
Address: 53 Bridle Gate Dr
Crawfordville, FL
32327

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: Don Talliver
Address: 53 Bridle Gate Dr
Crawfordville, FL 32327

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Don Talliver
Address: 53 Bridle Gate Dr
Crawfordville, FL 32327

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

Don W. Talliver

Required Signature/Registered Agent

2-27-12

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.

Don W. Talliver

Required Signature/Incorporator

2-27-12

Date

FILED
12 FEB 27 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA