

P12 000041819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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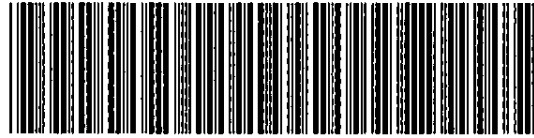
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2012 MAY -3 AM 10:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAY 04 2012

COVER LETTER

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

SUBJECT: Miller Bluff R. V. Park 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: Miller Bluff R. V. Park Inc.
Name (Printed or typed)

5215 Miller Bluff Rd
Address

Milton, FL 32583
City, State & Zip

850-499-5896
Daytime Telephone number

N/A
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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TALLAHASSEE, FLORIDA

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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:

Miller Bluff R. V. Park Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address
5215 Miller Bluff Rd
Milton, FL 32583

Mailing address, if different is:
5215 Miller Bluff Rd
Milton, FL 32583

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**Conduct Business as an R. V. Park
with effective date: May 1, 2012**

ARTICLE IV SHARES

The number of shares of stock is: **100 Shares**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **James K. Jackson Pres/Tres**
Address: **5207 Miller Bluff Rd
Milton, FL 32583**

Name and Title: **Natalie D. Jackson, Director**
Address: **3680 Overland Dr
Pensacola, FL 32504**

Name and Title: **Ruben L. Elliott V/Pres/ Sec**
Address: **933 Broxson Rd
Holt, FL 32564**

Name and Title: **Ulysses P. Lendor, Director**
Address: **933 Broxson Rd
Holt, FL 32564**

Name and Title: **James R. Jackson, Director**
Address: **6216 Woodward Lane
Milton, FL 32570**

Name and Title: **Alexander M Lendor, Director**
Address: **933 Broxson Rd
Holt, FL 32564**

ARTICLE VI REGISTERED AGENT

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

Name: **James K. Jackson**
Address: **5207 Miller Bluff Rd
Milton, FL 32583**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **James K. Jackson**
Address: **5207 Miller Bluff Rd
Milton, FL 32583**

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

James K. Jackson
Required Signature/Registered Agent

05-01-2012
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.

James K. Jackson
Required Signature/Incorporator

05-01-2012
Date

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TALLAHASSEE, FLORIDA