

P12000056461

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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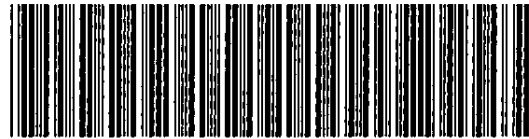
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2012 JUN 21 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

6/12-3/11/12
6/11/12

J. Shivers JUN 22 2012



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 12, 2012

MICHAEL CLEVINGER
12685 TOWER RD
BONITA SPRINGS, FL 34135

SUBJECT: FARMER MIKES PRODUCE INC.
Ref. Number: W12000031812

We have received your document for FARMER MIKES PRODUCE INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 312A00016468

COVER LETTER

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

SUBJECT: farmer mikes produce 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: michael j. clevenger

Name (Printed or typed)

12685 tower road

Address

bonita springs, fl.

City, State & Zip

239-253-2178

Daytime Telephone number

frmmik07@aol.com

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

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

2012 JUN 21 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I NAME farmer mikes produce inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
12685 tower road
bonita springs, fl. 34135

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
to grow and sell produce

ARTICLE IV SHARES
The number of shares of stock is 2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: michael clevenger president
Address: 12685 tower road
bonita springs, fl. 34135

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: michael j. clevenger, sr.
Address: 1285 tower road
bonita springs, fl. 34135

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: michaael j. clevenger, sr
Address: 126895 tower road
bonita springs, fl. 34135

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

6/6/2012
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.


Required Signature/Incorporator

6/6/2012
Date

2012 JUN 21 PM 2:09
TALLAHASSEE, FLORIDA