

P13000009961

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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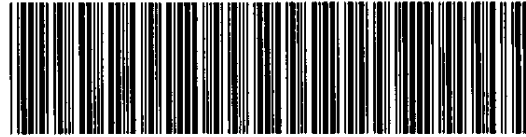
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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13 JAN 30 PM 12:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRB  
1/31/13

## COVER LETTER

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

**SUBJECT:** Liberty Racing Stable, 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:** Ms. Ingrid Mason

Name (Printed or typed)

1031 Ives Dairy Road, Suite 228

Address

North Miami Beach, FL 33179

City, State & Zip

786-512-6850

Daytime Telephone number

greathorseracer@aol.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: Liberty Racing Stable, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1031 Ives Dairy Road, Suite 228  
North Miami Beach, FL 33179

Mailing address, if different is:

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TALLAHASSEE, FLORIDA

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**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Race Horse Training

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Ingrid Mason, President

Name and Title: \_\_\_\_\_

Address 1031 Ives Dairy Road

Address: \_\_\_\_\_

Suite 228

North Miami Beach, FL 33179

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

(conti.)

FILED

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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


Name: John Kawalko  
Address: 1031 Ives Dairy Road, Suite 228  
North Miami Beach, FL 33179

**ARTICLE VII INCORPORATOR**

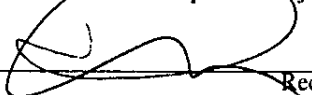
The name and address of the Incorporator is:

Name: Ms. Ingrid Mason  
Address: 1031 Ives Dairy Road, Suite 228  
North Miami Beach, FL 33179

*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*

 1/23/2013  
Required Signature/Registered Agent 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.*

 1/23/2013  
Required Signature/Incorporator Date