

P13000057362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

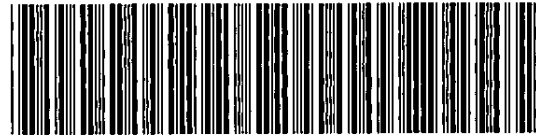
(Business Entity Name)

(Document Number)

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

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13 JUL - 1 PM 4: 56  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

WIZ- 31430

T. Burch JUL 8 2013

*[Handwritten signature]*

## COVER LETTER

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

SUBJECT: ~~Guns & Gold, Inc.~~ 5 Star Smelting, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Bonnie Scates-Caudill  
Name (Printed or typed)

618 S. Tamiami Trail  
Address

Osprey, FL 34229  
City, State & Zip

941-918-8000  
Daytime Telephone number

eb-bonnie@comcast.net  
E-mail address: (to be used for future annual report notification)

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



RECEIVED

13 JUL -1 PM 4:09

FLORIDA DEPARTMENT OF STATE

Division of Corporations

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

May 30, 2013

BONNIE SCATES-CAUDILL  
618 S TAMiami TRAIL  
OSPREY, FL 34229

SUBJECT: GUNS & GOLD, INC.  
Ref. Number: W13000031430

We have received your document for GUNS & GOLD, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 113A00013630

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:

~~Guns & Gold, Inc.~~ 5 Star Smelting, Inc.

**ARTICLE II PRINCIPAL OFFICE**

700

Principal street address

~~648~~ S. Tamiami Trail

Osprey, FL 34229

Mailing address, if different is:

P.O. Box 1608

Osprey, FL 34229

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

~~to sell, purchase, consign, trade and / or  
pawn goods from individuals and permitted vendors.~~

Precious Metals Processing

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TALLAHASSEE, FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

Name and Title: Lonie L. Buchner, Pres./Treas.

Address: 1735 South Creek Drive  
Osprey, FL 34229

Name and Title: Robert E. Turffs, V. Pres.

Address: 1444 1st Street  
Sarasota, FL 34229

Name and Title: Bonnie Scates-Caudill, Secy.

Address: 6319 Pontiac Lane  
North Port, FL 34229

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

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

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

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

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

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

(conti.)

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: Lonie L. Buchner  
Address: 618 S. Tamiami Trail  
Osprey, FL 34229

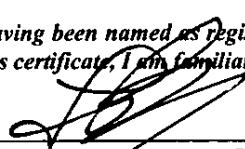
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SECRETARY OF STATE  
TALLAHASSEE, FL 0907

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

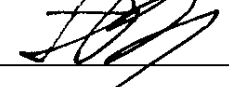
Name: Lonie L. Buchner  
Address: 618 S. Tamiami Trail  
Osprey, FL 34229

*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

5/21/2013  
\_\_\_\_\_  
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

5/21/2013  
\_\_\_\_\_  
Date