

# PI3000063219

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

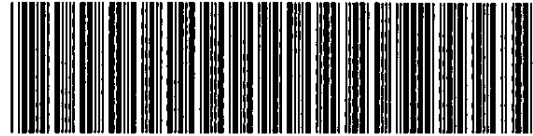
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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13 JUL 24 PM 4:12  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

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

**SUBJECT: THE GLADES RANCH, 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

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM: Elianeys Basulto**

Name (Printed or typed)

**13900 SW 205 Avenue**

Address

**Miami, FL 33196**

City, State & Zip

**786-285-8963**

Daytime Telephone number

**elianeys@yahoo.com** ✓

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

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

**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: THE GLADES RANCH, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

13900 SW 205 AVENUE

MIAMI, FL 33196

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: TO PROVIDE EQUESTRIAN ACTIVITIES.

**ARTICLE IV SHARES**

The number of shares of stock is: 10,000

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

Name and Title: Elianeys Basulto, President

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

Address 13900 SW 205 Avenue

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

Miami, FL 33196

786-251-7633

Name and Title: Elianeys Basulto, Secretary

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

Address 13900 SW 205 Avenue

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

Miami, FL 33196

786-251-7633

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

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(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:

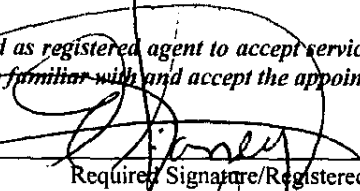
Name: Elianeys Basulto  
Address: 13900 SW 205 Avenue  
Miami, FL 33196

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Elianeys Basulto  
Address: 13900 SW 205 Avenue  
Miami, FL 33196

*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

6/24/2013

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

6/24/2013

Date

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