

P14000049798

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

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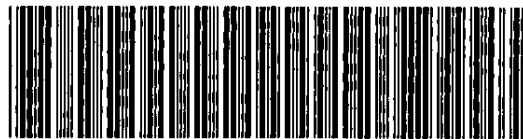
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Office Use Only

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05/19/14--01026--006 \*\*78.75

14 MAY 30 PM 4:57

RECEIVED  
DIVISION OF CORPORATIONS



RECEIVED RECEIVED

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 20, 2014

JONATHAN R. THACKER  
430 SOUTH PINE AVENUE  
GREEN COVE SPRINGS, FL 32043

SUBJECT: TERRAPROS, INC.  
Ref. Number: W14000031753

RECEIVED  
14 MAY 30 AM 10:13  
STATE  
TALLAHASSEE, FLORIDA

We have received your document for TERRAPROS, 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):

Please list corporation name in article 1.,

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The person designated as incorporator in the document and the person signing as incorporator must be the same.

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.

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

Letter Number: 414A00010895

## COVER LETTER

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

**SUBJECT: TerraPros, 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: Jonathan R. Thacker**

Name (Printed or typed)

**430 South Pine Avenue**

Address

**Green Cove Springs, Florida 32043**

City, State & Zip

**904-240-9263**

Daytime Telephone number

**TerraPros@gmail.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: Terra Pros, Inc

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

430 South Pine Avenue  
Green Cove Springs  
Florida 32043

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: any and all lawful business

14 MAY 30 PM 4:57  
CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA

**ARTICLE IV    SHARES** 100

The number of shares of stock is: \_\_\_\_\_

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

Name and Title: Jonathan R. Thacker - President  
Address: 430 South Pine Avenue  
Green Cove Springs  
Florida 32043

Name and Title: Delbert Cawley - Vice President  
Address: 1606 Spruce Street  
Green Cove Springs  
Florida 32043

Name and Title: Diane Cawley - Secretary  
Address: 1606 Spruce Street  
Green Cove Springs  
Florida 32043

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: JONATHAN THACKER

Address: 430 SOUTH PINE AVENUE  
GREEN COVE SPRINGS FL 32043

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jonathan Thacker

Address: 430 South Pine Avenue  
Green Cove Springs, FL 32043

SECRETARY OF STATE  
DIVISION OF CORPORATE  
14 MAY 30 PM 4:57

*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*

*Jonathan Thacker*  
Required Signature/Registered Agent

5/28/2014  
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.*

*Jonathan Thacker*  
Required Signature/Incorporator

5/28/2014  
Date