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COVER LETTER

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

SUBJECT:	Dean Stable Inc.		
SOBJECT.	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM:		e (Printed or typed)	
2 W	hittaker Court		
**************************************		Address	
Gue	elph, Ontario N1C 1G1		
	City	, State & Zip	
519	-803-9333		
	Daytime 7	Telephone number	
jam ——	esdeanstable01@yahoo.com		
	E-mail address: (to be use	ed 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)

The name of the corpor	E James Dean Stable Incation shall be:				
ARTICLE II PRIN	CIPAL OFFICE Principal street address	Mailing ad	dress, if different	is:	
25750 County Road	6A, Sorrento				
Florida 32776			-	15	
ARTICLE III PURI The purpose for which	OSE the corporation is organized is:	ace and train horses.	÷.)EC 21	
		NAMES OF TAXABLE PARTY.		<u> </u>	-;
				1.	
			t	÷	
ARTICLE V INITI	f stock is:	<u>PRS</u>			
Name and Title	le:				
Address	Guelph, Ontario N1C 1G1	Address:			
	Gueiph, Ohiano NTC 101				
Name and Titl	·····				
	e:	Name and Title:			
Address	e:				
Address	e:				
Address					
Address					
		Address:		**************************************	
Name and Titl	e:	Address: Name and Title:			
		Address: Name and Title:			

Name ar	nd Title:	Name and Title:
Address	S	Address:
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable James Dean 25750 County Road 46A, Sorrento Florida 32776	
ARTICLE VII	INCORPORATOR	Mark Manual
The name and a	ddress of the Incorporator is:	
Name:	James Dean	
Address:	25750 County Road 46A, Sorrento	£**
- 1447-125	Florida 32776	
Effective date, if (If an effective of days after the fine Note: If the date	lling.)	the statutory filing requirements, this date will not be listed as
_		ess for the above stated corporation at the place designated in registered agent and agree to act in this capacity
Jan	Required Signature/Registered Agent	Dec 15 2015 Date
	cument and affirm that the facts stated herein a Department of State constitutes a third degree fe	re true. I am aware that the false information submitted in a lony as provided for in s.817.155, F.S.
- Jan Requ	nes Den- ired Signature/Incorporator	Dec 15, 2015.

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