

P16000072858

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

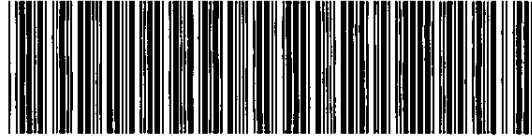
(Business Entity Name)

(Document Number)

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

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2016 AUG 29 PM 1:19  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

11/11

## COVER LETTER

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

**SUBJECT:** Patriot Pride Holdings Corporation

(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: Bridget Bradshaw  
Name (Printed or typed)  
  
PO BOX 438  
Address  
  
Silver Springs, FL 34489  
City, State & Zip  
  
352-207-4789  
Daytime Telephone number  
  
BRADSHAWBC@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)

FILED

**ARTICLE I NAME**

Patriot Pride Holdings Corporation

The name of the corporation shall be: \_\_\_\_\_

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

SE. DEPT. OF STATE  
MAILING ADDRESS, IF DIFFERENT IS:  
TALLAHASSEE, FLORIDA

4310 NE 10th Street

PO BOX 438

Ocala, Florida 34470

Silver Springs, Florida 34489

**ARTICLE III PURPOSE**

invest with the purpose of increasing returns from the investments.

The purpose for which the corporation is organized is: \_\_\_\_\_

**ARTICLE IV SHARES**

100

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

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

Name and Title: Bridget Bradshaw, President

Name and Title: Carl Bradshaw, Vice President

Address PO BOX 438

Address: PO BOX 438

Silver Springs, Florida 34489

Silver Springs, Florida 34489

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

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

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ST. JOHNS COUNTY OF FLORIDA  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

Name: \_\_\_\_\_  
Bridget Bradshaw  
Address: \_\_\_\_\_  
4310 NE 10th Street  
Ocala, Florida 34470

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: \_\_\_\_\_  
Bridget Bradshaw  
Address: \_\_\_\_\_  
4310 NE 10th Street  
Ocala, Florida 34470

**ARTICLE VIII EFFECTIVE DATE:**

August 25, 2016

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

Bridget Bradshaw  
Required Signature/Registered Agent

8/25/16  
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.*

Bridget Bradshaw  
Required Signature/Incorporator

8/25/16  
Date