

P 16 000080165

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(Business Entity Name)

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2016 AUG 16 PM 2:47  
SECRETARY OF STATE  
TALLAHASSEE, FL 0719



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 23, 2016

STEVE SHAFER  
2910 KERRY FOREST PARKWAY, D-4 382  
TALLAHASSEE, FL 32309

SUBJECT: MONSTER BUCKS, INC.  
Ref. Number: W16000058334

We have received your document for MONSTER BUCKS, INC. and your check(s) totaling \$87.50. 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.

The document number of the name conflict is .

L16000120240

Please return 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.

Nadira D McClees-Sams  
Regulatory Specialist II

Letter Number: 916A00017859

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

16 SEP 29 PM 2:00  
RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** Monster Buck, 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:** Steve Shafer

\_\_\_\_\_  
Name (Printed or typed)

2910 Kerry Forest Parkway, D-4-382

\_\_\_\_\_  
Address

Tallahassee, FL 32309

\_\_\_\_\_  
City, State & Zip

850-396-0474

\_\_\_\_\_  
Daytime Telephone number

steve@monsterbuck.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: Monster Buck, Inc

Monster Buck official, Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
6265 Old Water Oak Rd, #205  
Tallahassee, FL 32312

Mailing address, if different is:  
2910 Kerry Forest Parkway, D-4-382  
Tallahassee, FL 32309

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To manufacture and sell or license a line of hunting products and apparel with the Monster Buck logo and name.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: Steve Shafer, CEO

Address 2910 Kerry Forest Parkway, D-4-382  
Tallahassee, FL 32309

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

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

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

2016 AUG 16 PM 2:47  
TALLAHASSEE, FL 32309

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: Steve Shafer \_\_\_\_\_

Address: 2910 Kerry Forest Parkway, D-4-382 \_\_\_\_\_

Tallahassee, FL 32309 \_\_\_\_\_

**ARTICLE VII INCORPORATOR**

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

Name: Steve Shafer \_\_\_\_\_

Address: 2910 Kerry Forest Parkway, D-4-382 \_\_\_\_\_

Tallahassee, FL 32309 \_\_\_\_\_


**ARTICLE VIII EFFECTIVE DATE:**

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*

  
\_\_\_\_\_  
Required Signature/Registered Agent

8-12-2016  
\_\_\_\_\_  
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

8-12-2016  
\_\_\_\_\_  
Date

2016 AUG 16 PM 2:47  
SECRETARY OF STATE  
TALLAHASSEE FL 09000