

P200000003095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

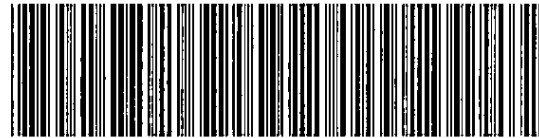
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



800337847398

12/18/19--01015--001 --\$27.50

FILED

JAN 16 AM 10:42

SECRETARY OF STATE  
TALLAHASSEE, FL

K PAGE

JAN 17 2020



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 10, 2020

KENTUCKY COSTELLOW & CHELSEA CARNS  
735 NW 74TH STREET  
GAINESVILLE, FL 32601

SUBJECT: THE MAGNOLIA RECREATION CO.  
Ref. Number: W20000002229

We have received your document for THE MAGNOLIA RECREATION CO. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE LIST COMPLETE ADDRESS FOR DIR.

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.

Keyna E Page  
Regulatory Specialist II

Letter Number: 120A00000671

RECEIVED  
2020 JAN 16 PM 4:46  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA  
COMMERCIAL  
REGISTRATION SERVICES

## COVER LETTER

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

**SUBJECT:** The Magnolia Recreation Company

(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:** Kentucky Costellow & Chelsea Carnes

Name (Printed or typed)

735 NW 7th Street

Address

Gainesville, FL 32601

City, State & Zip

(352) 281-6913

Daytime Telephone number

magnoliarecreationco@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: The Magnolia Recreation Company

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

735 NW 7th Street  
Gainesville, FL 32601

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

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

To create a general public benefit and engage in any and all legal business.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV SHARES**

The number of shares of stock is: 10,000,000

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

Name and Title: Kentucky Costellow, Benefit Director Name and Title: Chelsea Carnes, Director

Address: 735 NW 7th Street Address: 735 NW 7th Street  
Gainesville, FL 32601 Gainesville, FL 32601

\_\_\_\_\_  
\_\_\_\_\_

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

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

\_\_\_\_\_  
\_\_\_\_\_

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

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

\_\_\_\_\_  
\_\_\_\_\_

FILED  
2020 JAN 16 AM 10:42  
SECRETARY OF STATE  
TALLAHASSEE, FL

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: Kentucky Costellow  
Address: 735 NW 7th Street  
Gainesville, FL 32601

**ARTICLE VII INCORPORATOR**

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

Name: Kentucky Costellow  
Address: 735 NW 7th Street  
Gainesville, FL 32601

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: January 1, 2020 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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*

Kentucky Costellow

Required Signature/Registered Agent

1/16/2020

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.*

Kentucky Costellow

Required Signature/Incorporator

Date

FILED  
JAN 16 AM 10:42  
1/16/2020  
TALLAHASSEE, FL  
SECRETARY OF STATE