

**P20000074543**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : REGISTERED AGENTS INC.  
Account Number : 120090000081  
Phone : (307)200-2803  
Fax Number : (855)330-1010

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**Junior's Outdoorsman Supplies, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

2029 SEP 24 AM 10:55

## 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: Junior's Outdoorsman Supplies, Inc.

### ARTICLE II PRINCIPAL OFFICE

Principal street address

7901 4th St N

STE 300

St. Petersburg FL 33702

Mailing address, if different is:

7901 4th St N

STE 300

St. Petersburg FL 33702

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide our customers with support, equipment, accessories and proper training to get the most out of the shooting sports and enjoyment of American's great outdoors.

Living the American Dream of FREEDOM,

### ARTICLE IV SHARES

The number of shares of stock is: 1

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: George McLerren, DPTS

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

Address 7901 4th St N STE 300

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

St. Petersburg, FL USA 33702

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

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

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

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

20 SEP 2011 11:38 AM

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: Registered Agents Inc.  
Address: 7901 4th St N STE 300  
St. Petersburg FL 33702

**ARTICLE VII INCORPORATOR**

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

Name: Riley Park  
Address: 7901 4th St N STE 300  
St. Petersburg FL 33702

**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 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*

Bill Havre Registered Agents Inc. - Assistant Secretary 9/14/20  
Required Signature/Registered Agent 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.*

Riley Park 9/14/20  
Required Signature/Incorporator Date