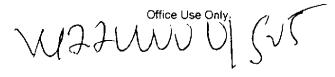


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



T. SCOTT FEB 1 0 2022



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12/29/21--01017--005 **70.00







FLORIDA DEPARTMENT OF STATE Division of Corporations

January 19, 2022

SPORTMAN'S WAREHOUSE INC. 1475 W 9000 S SUITE A WEST JORDAN, UT 84088

SUBJECT: SPORTMAN'S WAREHOUSE INC.

Ref. Number: W22000001505

We have received your document for SPORTMAN'S WAREHOUSE INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 422A00000417

COVER LETTER

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

SUBJECT:	Sportsman's Warehouse Inc.					
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFF						
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 ADDITIONAL CO	& Certificate of Status			
FROM:	Anne Gibson, Payro Nam	oll Manager e (Printed or typed)				
_	1475 W 9000 S, Suite A	<u> </u>				
		Address				
	West Jordan, UT 84088					
	City	. State & Zip				
:	801-304-2829					
	Daytime 1	Felephone number				
;	agibson@sportsmans.com					
	E-mail address: (to be use	d for future annual report r	otification)			

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 NAM The name of the como	<u>E</u> ration shall be: Sportsman's Wareh	ouse Inc.		
The name of the corporation shall be: Sportsman's Warehouse ARTICLE II PRINCIPAL OFFICE Principal street address 456 North US Hwy 24/441		Mailing ac	Mailing address, if different is: 1475 W 9000 S, Suite AWest.Jordan_UT_84088	
	Lady Lake, FL 32159			
ARTICLE III PUR. The purpose for which	POSE 1 the corporation is organized is: Profe	essional Corporation		
				
ARTICLE V INIT	RES Of stock is: 2.00 (000 MAL OFFICERS AND/OR DIRECTORS tle: Jon Barker, C	2		
Address	1475 W. 9000 S.			
	Ste A West Jandan, UT?			
Name and Titl	e: Jeff white, CF	Name and Title:		
Address	1475 W. 9000 S. Ste A	Address:		
	west Jordan, UT	86043		
Name and Titl	e:		* 22	
Address		Address:	3	
			<u></u>	
			.e.,	

Name and Ti	tle:	Name and Title:	
Address		Address:	
			- <u>-</u> -
ARTICLE VI REG	ISTERED AGENT a street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name:	CT Corporation	_	
Address:	1200 S Pine Island Rd, # 250	_	
	Plantation, FL 33324	_	
ARTICLE VII INC	<u>ORPORATOR</u>		
The name and address	ss of the Incorporator is:		
Name:	Sportsman's Warehouse Inc.	-	
Address:	1475 W 9000 S, Suite A	-	
	West Jordan, UT 84088	-	
ARTICLE VIII EF	FECTIVE DATE: r than the date of filing:		
(If an effective date i filing.)	s listed, the date must be specific and cannot		or or 90 days after the
Note: If the date inset the document's effecti	rted in this block does not meet the applicable ive date on the Department of State's records.	statutory filing requirements.	this date will not be listed as
certificate, I am famili	s registered agent to accept service of process for with and accept the appointment as register	or the above stated corporation ed agent and agree to act in thi	at the place designated in this is capacity
Lanise B	Sell		10/8/2021
	Required Signature/Registered Agent		Date
I submit this documer document to the Depar	nt and affirm that the facts stated herein are ri men g of State constitutes a third degrae felon	true. I am aware that the fals y as provided for in s.817.155, i	e information submitted in a F.S.
			9-21-2021
Required Signature/In	corporator	Date	

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