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COVER LETTER

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

SUBJECT: SUNSHING BATL BONDS LC (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	图 \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Annie Re Name 820 Reddi	Adick (Printed or typed) ick Lane		
Talahassee FL 32317 City, State & Zip				
_	850-508 Daytime Tel	5-7648 lephone number	· · · · · · · · · · · · · · · · · · ·	
_	E-mail address: (to be used to	for future annual report no	tification)	
NOTE: Please provide the original and one copy of the articles.				7 7

COVER LETTER

Ref: W24000104322

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

Tallahassee, FL 32314 Enclosed are an original and one (1) copy of the articles of incorporation and a check for: □ \$70.00 □ \$78.75 □ \$78.75 □ \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Tallahassee City, State & Zip

NOTE: Please provide the original and one copy of the articles.

- B 0 8 - 76 48

Daytime Telephone number

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) <u>ARTICLE I NAME</u> The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE Principal street address Mailing address, if different is: The purpose for which the corporation is organized is: 10 bail incarierated o ensure that the ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS Name and Title: Address _____ Name and Title:___ Name and Title: Address Address: Name and Title: Name and Title: Address _____ Address:

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.Q. Box	x NOT acceptable) of the registered agent is:
Name: Annie Red	dict
Address: 820 Redd	irk Lane
Tallahassa	er FL 32317
ARTICLE VII INCORPORATOR	Annie Redick JIN
The <u>name and address</u> of the Incorporator is:	Annie Redick
Name: 500 Sh9110	2 Bail Bonds, LC
Address: 137 West	Glenn Road
Monticella	0, FL 32344 : F
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:	
(If an effective date is listed, the date must be filing.)	e specific/and cannot be more than five days prior or 90 days after the
Note: If the date inserted in this block does no the document's effective date on the Department	at meet the applicable statutory filing requirements, this date will not be listed as nt of State's records.
	pt service of process for the above stated corporation at the place designated in this pointment as registered agent and agree to act in this capacity
Hrnu Reddelk- Required Signature/F	7/5/2024
	•
	cts stated herein are true. I am aware that the false information submitted in a s a third degree felony as provided for in s.817.155, F.S.
Required Signature/Incorporator	Date 1/3/2029



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- CHECATIONS
MERCIAL
MERCIAL

July 18, 2024

ANNIE REDDICK 820 REDDICK LANE TALLAHASSEE, FL 32317 US

SUBJECT: SUNSHINE BAIL BONDS LLC

Ref. Number: W24000104322

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the **complete document**, including the <u>electronic filing cover sheet</u>.

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.

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 P11000051656.

If you have any further questions concerning your document, please call (850) 245-6052.

Tabitha J Howell
Regulatory Specialist II
New Filings Section

Letter Number: 324A00015730

