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TRANSMITTAL LETTER

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

RECEIVED
DEPT. OF STATE
TALLAHASSEE, FLORIDA
MAR 12 PM 6:46

SUBJECT: WILLISTON T HANGERS, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of Incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: WILLISTON T HANGERS, INC.
Name (printed or typed)

RT. 4, BOX 1685

Address

WILLISTON, FL 32696

City, State & Zip

(904) 528-4900

Daytime Telephone number

600001454980
-04/12/95--01109--003
***122.50 ***122.50

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

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

WILLISTON T HANGERS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

RT. 4, BOX 1685
WILLISTON, FL 32696

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

Authorized 7500 shares, at \$1.00 per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ELEANOR PRATT
9729 WEST POMEGRANATE STREET
CRYSTAL RIVER, FL 34428

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ELEANOR PRATT
9729 WEST POMEGRANATE STREET
CRYSTAL RIVER, FL 34428

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

10th day of April, 1995.

Eleanor Pratt
Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
APR 12 1995

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: WILLISTON T HANGERS, INC.

2. The name and address of the registered agent and office is:

ELEANOR PRATT

(Name)

9729 WEST POMEGRANATE STREET

(P.O. Box not acceptable)

CRYSTAL RIVER, FL 34428

(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Eleanor Pratt
(Signature)

April 10, 1995

(Date)