

PG 70000 82628

TRANSMITTAL LETTER

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

SUBJECT: FAMILY FARMS AND SERVICES  
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 122.50.

FROM:

DALE G. SIMPSON

Name

221 LONG LAKE ROAD

Address

HAWTHORNE, FL 32640

City, State, & Zip

(352) 425-3243

Telephone Number

800002293668--2  
-09/22/97--01109--016  
\*\*\*\*122.50 \*\*\*\*122.50

(4)

DNC  
9.24.97

Note: Additional copy of articles is needed only when certified copy is requested.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

. 97 SEP 22 AM 9:38

FILED

FILED

97 SEP 22 AM 9:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**

**OF**

FAMILY FARMS AND SERVICES, INC.

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:

FAMILY FARMS AND SERVICES, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

→ 232 LONG LAKE ROAD ← LOCATION ONLY

MAILING ADDRESS: P.O. BOX 1145  
MELROSE, FLA 32666-1145

**ARTICLE III CAPITAL STOCK**

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

500

**ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is:

DALE G. SIMPSON  
221 LONG LAKE RD.  
HAWTHORNE, FL 32640

**ARTICLE V INCORPORATOR(S)**

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

DALE G. SIMPSON  
221 LONG LAKE RD  
HAWTHORNE, FL 32640

LEE M. SIMPSON  
232 LONG LAKE RD  
HAWTHORNE, FL 32640

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

19<sup>th</sup> day of SEPTEMBER 19 97.

Lee M. Simpson / Pres.  
Signature/Title

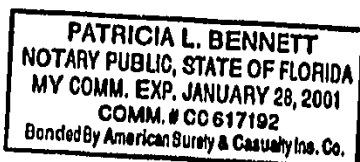
Dale G. Simpson / V. Pres, Secretary  
Signature/Title

\_\_\_\_\_  
Signature/Title

STATE OF FLORIDA  
COUNTY OF CLAY

Signed and affirmed before me on September 19, 1997, by LEE M. SIMPSON AND DALE G SIMPSON, who produced FL Driver's Licenses as identification.

Patricia L. Bennett  
Patricia L. Bennett, Notary Public



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

Pursuant to the provisions of section 607.0501, 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: FAMILY FARMS AND SERVICES, Inc.

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

DALE G. SIMPSON  
(NAME)

221 LONG LAKE ROAD  
(P.O. BOX NOT ACCEPTABLE)

HAWTHORNE, FL 32640  
(CITY/STATE/ZIP)

SIGNATURE

Dale G. Simpson  
(corporate officer)

TITLE

Secretary

DATE

9-17-97

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.

SIGNATURE

Dale G. Simpson

DATE

9-17-97

REGISTERED AGENT FILING FEE: \$35.00

97 SEP 22 AM 9:38  
FILED  
TALLAHASSEE, FLORIDA