

P970000089806

TRANSMITTAL LETTER

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

700002322807--8
-10/17/97--01036--002
*****78.75 *****78.75

SUBJECT: CASH GADDY, 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

Please return the photocopy to me with the filing date stamped on it.

FROM:

JOHN ATKINSON

Name (printed or typed)

3535 NE FOREST KING ST. #258

Address

OCALA, FLORIDA 34470

City, State & Zip

(352) 843 5944

Daytime Telephone Number

FILED
TALLAHASSEE, FLORIDA

97 OCT 17 AM 9:24

FILED

me 10/20/97

Articles of Incorporation

1. The name of the corporation shall be:

CASH CADDY, INC.

2. The principal place of business and mailing address of the corporation is:

3535 NE FORT KING STREET UNIT #258
OCALA FLORIDA 34470

3. The corporation shall have the authority to issue ~~ONE MILLION~~ shares of stock.

4. The registered agent of the corporation is JOHN ATKINSON and the registered street address is 3535 NE FORT KING ST-UNIT 258

OCALA Florida 34470

5. The initial Board of Directors shall have 1 member(s) whose name(s) and address(es) is/are as follows: JOHN ATKINSON

3535 NE FORT KING ST-UNIT 258
OCALA, FLORIDA 34470

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is JOHN ATKINSON whose street address is 3535 NE FORT KING ST-UNIT 258

OCALA, FLORIDA 34470

Dated OCT 15/97


Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated OCT 15/97


Registered Agent

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97 OCT 17 AM 9:24
STATE OF FLORIDA
TALMADGE COUNTY