

P97000099/81

TRANSMITTAL LETTER

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

SUBJECT: ASHMORE EQUESTRIAN CENTER, INC.
(Proposed corporate name - must include suffix)

800002350028--5
-11/18/97--01026--007
*****78.75 *****78.75

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

ADDITIONAL COPY REQUIRED

FROM: HILDA HICK
Name (Printed or typed)
1010 AYRSHIRE STREET
Address
ORLANDO, FLORIDA 32803
City, State & Zip
(407) 898-6363 or (407) 523-4605
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

97 NOV 18 AM 8:44

FILED

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

11/21/97 T.M.

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: ASHMORE EQUESTRIAN CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

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

ASHMORE EQUESTRIAN CENTER, INC., 8801A MAGNOLIA HOMES RD., ORLANDO, FL 32801

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

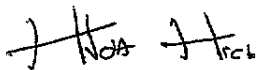
The name and Florida street address of the initial registered agent are:

HILDA HICK, 1010 AYRSHIRE ST., ORLANDO, FL 32803

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

HILDA HICK, 1010 AYRSHIRE ST., ORLANDO, FL 32803



Signature/Incorporator

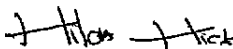
HILDA HICK

10.17.97

Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

10.17.97

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA