

P98000012665

TRANSMITTAL LETTER

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

400002424724--5
-02/09/98--01030--003
*****78.75 *****78.75

SUBJECT: TATANKA, 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

ADDITIONAL COPY REQUIRED

FROM: THOMAS GREGORY McRAE
Name (Printed or typed)

1500 PARK DR.
Address

CASSELBERRY FL 32707
City, State & Zip

407-696-4442
Daytime Telephone number

FILED
98 FEB -9 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

B. BROOK FEB 09 1998

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:

TATANKA, INC

ARTICLE II PRINCIPAL OFFICE

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

1563 SOUTH HWY 17-92
Longwood FL 32750

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

THOMAS GREGGORY MCRAE
1500 PARK DR
CASSELBERY FL 32707

ARTICLE V INCORPORATOR

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

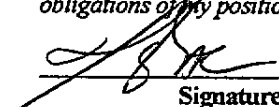
THOMAS GREGGORY MCRAE
1500 PARK DR
CASSELBERY FL 32707


Signature/Incorporator

FEB 6, 98
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

FEB 6, 98
Date

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TALLAHASSEE, FLORIDA