

P 98000018220

TRANSMITTAL LETTER

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

Shamlar, Inc.

400002438124--2  
-02/23/98--01117--005  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: \_\_\_\_\_

(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: Laura Westcott  
Name (Printed or typed)

P.O. Box 605  
Address

Panacea FL 32346  
City, State & Zip

926-2558  
Daytime Telephone number

Laura GAVE

AUTHORIZATION BY PHONE TO  
CORRECT Name  
DATE 2-25-98  
DOC EXAM mm

FILED  
98 FEB 23 AM 11:34  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

## ARTICLES OF INCORPORATION

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

**Article I:** The name of the corporation shall be: SHAMLAR, INC.

**Article II:** The principal place of business and mailing address of this corporation shall be:  
Post Office Box 605, 103 Center Street, Panacea, County of Wakulla, Florida.

**Article III:** The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One hundred (100).

**Article IV:** The name and Florida street address of the initial registered agent is:  
Laura Elaine Westcott  
103 Center Street  
Panacea, FL 32346

**Article V:** Signed:



Laura Elaine Westcott  
Post Office Box 605  
103 Center Street  
Panacea, FL 32346

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



Signature/Incorporator

2-16-98

Date

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