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TRANSMITTAL LETTER

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

400002570604--1
-06/24/98--01026--024
****131.25 ****131.25

ANDERSON EQUESTRIAN & LIVESTOCK ENTERPRISES, INC.

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

EFFECTIVE DATE

7-1-98

FROM:

AMANDA ANDERSON

Name (Printed or typed)

602 EAST LAMBRIGHT ST.

Address

TAMPA, FL 33604

City, State & Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 JUN 24 PM 12:43

FILED

Roger Anderson GAVE 813 - 237-5466

Daytime Telephone number

Called and wants me to
mail Auto to Da-add.

DATE 6-25-98

DOC. EXAM. CB

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

CB
6-25-98
2

EFFECTIVE DATE
7-1-98

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

ANDERSON EQUESTRIAN & LIVESTOCK ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

602 East Lambright Street, Tampa, Florida 33604

ARTICLE III SHARES

One Thousand (1,000) Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

Amanda Anderson, 602 East Lambright Sreet, Tampa, Florida 33604

ARTICLE V INCORPORATOR

Roger D. Anderson, 113 West Gaston Street, Savannah, Georgia 31401
Amanda Anderson, 602 East Lambright Sreet, Tampa, Florida 33604

ARTICLE VI DATE OF INCORPORATION - EFFECTIVE DATE

July 1, 1998

Roger D. Anderson
Signature/Incorporator

6/21/98
Date

M. Anderson
Signature/Incorporator

6/21/98
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 statues 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.

M. Anderson
Signature/Registered Agent

6/21/98
Date

FILED
98 JUN 24 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA