TRANSMITTAL LETTER 0086433 Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314 Magnolia Bay Nurser Y, Inc. (Proposed corporate name - must include suffix) **SUBJECT:** 3000026575 -10/07/98--01 ****131.25 ※宗宋宗承[2]] Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$78.75 □\$122.50 **3** \$131.25 \$70.00 **Filing Fee** Filing Fee Filing Fee. **Filing Fee** & Certificate & Certified Copy Certified Copy & Certificate ADDITIONAL COPY REQUIRED Alan J. Clark Name (Printed or typed) 1- L'JO' 86 FROM: 1989 S. Federal Hwy. 1 7 PM 3: Stuant, FL 34994 City, State & Zip <u>561-223-0307</u> Daytime Telephone number

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

BROCK OCT 8 1998

ARTICLES OF INCORPORATION

OF

MAGNOLIA BAY NURSERY, INC.

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:

MAGNOLIA BAY NURSERY, INC.

ARTICLE II - PRINCIPAL OFFICE

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

7251 SW Fox Brown Rd. Indiantown, FL 34956

ARTICLE III - SHARES

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

One Hundred (100) shares No Par Value

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

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RHONDA L. RENICK 7251 SW Fox Brown Road Indiantown, FL 34956

PM 3:

ARTICLE V - INCORPORATOR

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

GERALD W. RENICK 7251 SW Fox Brown Road Indiantown, FL 34956

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GERALD W. RENICK Signature/Incorporator

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Having been named as registered agent and to accept service of process for the above stated coporation at the place designed 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.

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RHONDA L. RENICK Signature/Registered Agent

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