P99000004437

TRANSMITTAL LETTER

FILED

99 JAN 13 AM 9:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

400002739674--2
-01/13/99--01053--003
*****87.50 *****87.50

SUBJECT: SENEPOL PLUS, 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 of Status	☐ $78.75 Filing Fee & Certified Copy	☑ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: VERONICA I. JONES
Name (Printed or typed)

P.O. 829
Address

VERNON, FL 32462
City, State & Zip

850-535-0851
Daytime Telephone number

P. Hall JAN 15 1999

2

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

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.

FILED
99 JAN 13 AM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

SENEPOL PLUS, INC.

ARTICLE II PRINCIPAL OFFICE

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

3264 HASKINS DRIVE
PO. BOX 389, VERNON, FL. 32462

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

VERONICA I. JONES
3264 HASKINS DRIVE (PO 829)
VERNON, FL 32462

ARTICLE V INCORPORATOR

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

VERONICA I. JONES
PO 829
VERNON, FL 32462

Signature/Incorporator — **Date** 1-6-99

(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 — **Date** 1-6-99