

P99000010714
TRANSMITTAL LETTER

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

SUBJECT: Majestic Oaks Equestrian Center, Inc.
(Proposed corporate name - must include suffix)

100002760381--9
-02/01/99--01109--001
*****87.50 *****87.50

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: Patricia M. Macfarlane
Name (Printed or typed)

8421 62nd Street
Address

Pinellas Park, FL 33781
City, State & Zip

(407) 544-8371
Daytime Telephone number

FILED
99 FEB - 1 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dmc
2-3-99

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 Cooperation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Majestic Oaks Equestrian Center, Inc.

ARTICLE II PRINCIPAL OFFICE

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

8421 62nd Street
Pinellas Park, Fl 33781

ARTICLE III SHARES

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

1,000 (one thousand) shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

David J. Macfarlane
8421 62nd Street
Pinellas Park, Fl 33781

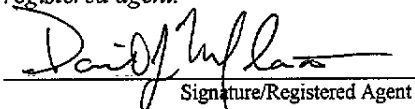
ARTICLE V INCORPORATOR

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

Patricia M. Macfarlane
8421 62nd Street
Pinellas Park, Fl 33781

 Jan 14, 1999
Signature/Incorporator 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.

 Jan 24, 1999
Signature/Registered Agent Date

FILED
99 FEB - 1 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA