

P9 9000053167

ROOSEVELT S. ISAAC  
Requestor's Name

347 S. ORANGE AVE  
Address

ARCADIA FL. 1  
City/State/Zip

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. POLK ENTERPRISES OF DESOTO CO. INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☐ Pick up time \_\_\_\_\_

☒ Certified Copy

☐ Mail out

☒ Will wait

☐ Photocopy

☐ Certificate of Status

APPROVED  
FILED  
99 JUN 11 AM 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

500002901745--1  
-06/11/99-01037-023  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

RECEIVED  
99 JUN 11 AM 11:16  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

OTHER FILINGS	
<input checked="" type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

ARTICLE OF CORPORATION

OF

POLK ENTERPRISES OF DESOTO CO., INC.

ARTICLE I

NAME

THE NAME OF THIS CORPORATION IS POLK ENTERPRISES OF DESOTO  
COUNTY, INC. 347 S. ORANGE AVE. ARCADIA, FLORIDA 34266

ARTICLE II

DURATION

THIS CORPORATION SHALL EXIST PERPETULLY, AND THE DATE OF  
COMMENCEMENT OF CORPORATE EXISTENCE SHALL BE THE DATE ON  
WHICH THESE ARTICLES ARE FILED WITH THE SECRETARY OF STATE  
IN THE STATE OF FLORIDA.

ARTICLE III

PURPOSE

THIS CORPORATION IS ORGANIZED FOR THE PURPOSE OF ENGAGING  
IN FOR PROFIT ANY BUSINESS ACTIVITIES NOT PROHIBITED TO  
CORPORATION FOR PROFIT UNDER THE LAWS IN THE STATE OF  
FLORIDA OR ANY OTHER LOCATION.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 JUN 11 AM 11:31

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AND  
FILED

ARTICLE IV

CAPITAL STOCK

THIS CORPORATION IS AUTHORIZED TO ISSUE SEVENTY-FIVE  
HUNDRED ( 7,500 ) SHARES OF COMMON STOCK WITH A PAR  
VALUE OF \$ 1.00 PER SHARE.

ARTICLE V

REGISTERED AGENT

THE ADDRESS OF THE INITIAL REGISTERED AGENT OF THIS  
CORPORATION WITHIN THE STATE OF FLORIDA IS 347  
SOUTH ORANGE AVE. ARCADIA, FLORIDA

THE NAME OF THE INITIAL REGISTERED AGENT AT THE ABOVE  
ADDRESS IS JOANN ALFORD

ARTICLE VI

INCORPORATOR(S)

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, DO HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION, THE PERSON(S) WHO HAVE SIGNED AND DELIVERED OR REQUEST TO BE DELIVERED THESE ARTICLES OF INCORPORATION TO THE DEPARTMENT OF STATE, DIVISION OF CORPORATION IS THE INCORPORATOR(S) OF THIS CORPORATION, WHOES NAME(S) AND ADDRESS(ES) IS/ARE

*Richard Polk Jr.*  
RICHARD POLK, JR. 1450 GIBSON STREET ARCADIA, FL. 34266  
INCORPORATOR ADDRESS CITY AND STATE  
VERONICA POLK 1450 GIBSON STREET ARCADIA, FLORIDA  
INCORPORATOR ADDRESS CITY AND STATE

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTIONS 607.0501 OR 617.0501,  
FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED  
UNDER THE LAW OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING  
STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED  
AGENT IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS POLK ENTERPRISES OF DESOTO CO., INC.
2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE :

NAME JOANN ALFORD  
ADDRESS 347 SOUTH ORANGE AVE.  
ARCADIA, FLORIDA 34266  
CITY STATE ZIP

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 APPOINT-  
MENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.  
I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTE  
RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES  
AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF THIS  
POSITION AS REGISTERED AGENT.

SIGNATURE Jo Ann Alford  
DATE 6- -1999

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED