

TRANSMITTAL LETTER

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

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-07/21/99--01030--019
*****78.75 *****78.75

SUBJECT: Hoof and Harness, 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: Connie K. Parent
Name (Printed or typed)

1728 Green Meadow DR
Address

Lutz, FL 33549
City, State & Zip

(813) 949-9203
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 JUL 21 PM 6:28

FILED

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

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99 JUL 21 PM 6:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

The name of the corporation shall be:

Hoof and Harness, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Hoof and Harness, Inc.
1728 Green Meadow Drive
Lutz, FL 33549

ARTICLE III SHARES

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

One hundred shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Connie K. Parent
1728 Green Meadow Drive
Lutz, FL 33549

ARTICLE V INCORPORATOR

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

Alfred F. Parent
1728 Green Meadow Drive
Lutz, FL 33549


Signature/Incorporator

7/19/99
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


Signature/Registered Agent

07/19/99
Date