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TRANSMITTAL LETTER

FILED
99 AUG -2 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

400002947114--7
-08/02/99--01045--013
*****70.00 *****70.00

SUBJECT: *Long*
Long Enterprises, 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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: *Michael Long*
Name (Printed or typed)

At 1 Box 182-A
Address

Monticello, FL 32344
City, State & Zip

(850) 997-2144
Daytime Telephone number

Michael Long GAVE
AUTHORIZATION BY PHONE TO
CORRECT *Art. I*
DATE *8/10/99*
DOC. EXAM *Walter Brown*

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

BROWN, AUG 10 1999

ARTICLES OF INCORPORATION

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ARTICLE I NAME

The name of the corporation shall be: Long & Long Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 155 North Jefferson St.
Monticello, Florida 32345

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any time is: 100
shares

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and Florida street address of the initial registered agent are: Michael A. Long.
Route 1, Box 182-A, Monticello, Florida 32344

ARTICLE V INCORPORATOR

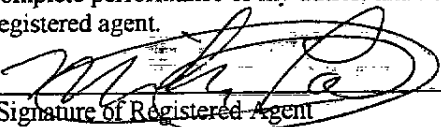
The name and address of the incorporator to these Articles of Incorporation are:

Michael A. Long, Route 1, Box 182-A, Monticello, Florida 32344


Signature of Incorporator

7-30-99
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 of Registered Agent

7-30-99
Date