TRANSMITTAL LETTER

P99000092980

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

60000301 9876---0
-10/20/99--01071--005
*****87.50 *****87.50

SUBJECT: Shy Fox 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: Richard D. Webber

Name (Printed or typed)

14232 Odom Road

Address

Younastown FL. 32466

City, State & Zip

1-850-722-1774- Home 1-850-624-5847-Cel,

Daytime Telephone number

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

D. BROWN OCT 2 1 1999

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:

Shy Fox INC

ARTICLE II   PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:

14232 ODom Rd. YoungsTown FL, 32466

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

100 Shares

ARTICLE IV   INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:

14232 ODom Rd. Youngstown FL 32466
Richard D Webber

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

Richard D Webber
14232 ODom Rd Youngstown FL 32466

_____   10-18-99
Signature/Incorporator   **Date**

(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

_____   10-18-99
Signature/Registered Agent   **Date**