

PO0000028927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

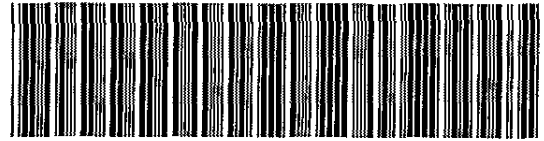
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2006 FEB 27 AM 10:08
CLERK OF STATE
TALLAHASSEE FLORIDA

J 2/28/06

COVER LETTER

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2006 FEB 27 AM 10:09

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

SUBJECT: JOHNNY ROBB PUBLIC RELATIONS INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: JOHNNY ROBB
Name (Printed or typed)

358 C ROAD
Address

LOXAHATCHEE, FLORIDA 33470
City, State & Zip

561-512-7896
Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**ARTICLES OF INCORPORATION
OF
JOHNNY ROBB PUBLIC RELATIONS INC.**

Article 1.

The name of the corporation shall be Johnny Robb Public Relations Inc.

Article 2.

The principal place of business/mailing address is:

3588 C Road
Loxahatchee, Florida 33470

Article 3.

The purpose for which the corporation is organized is to a for profit company.

Article 4.

The number of shares of stock is 100.

Article 5.

The initial officers are:

Johnny Robb President CEO, CFO, Treasurer

Article 6.

The registered agent and registered address are:

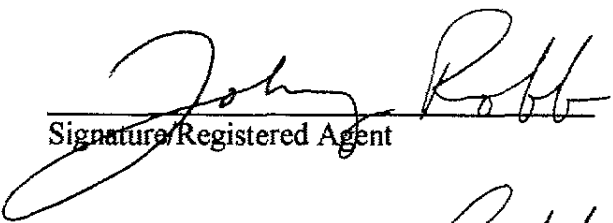
Johnny Robb
3588 C Road
Loxahatchee, Florida 33470

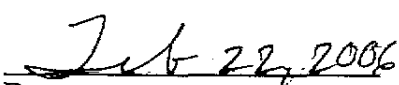
Article 7.

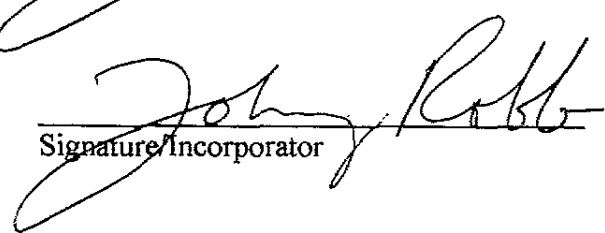
The name and address of the Incorporator is:

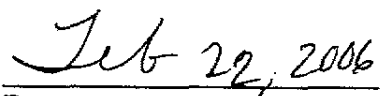
Johnny Robb
3588 C Road
Loxahatchee, Florida 33470

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.


Signature/Registered Agent


Date


Signature/Incorporator


Date

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TALLAHASSEE