

FD9000022391

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

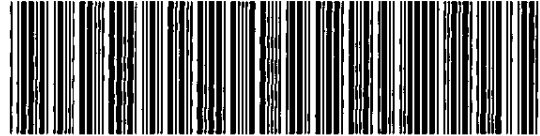
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/02/09--01024--004 **87.50

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09 MAR -9 AM 11:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRB
3/11

209-10059

COVER LETTER

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

SUBJECT: See-Shell First Assisting S- Corporation EIN 26-4209156
(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Michele Mills Kunkle
Name (Printed or typed)

3406 61st Terrace East
Address

Ellenton, FL 34222
City, State & Zip

941-531-4531
Daytime Telephone number

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



RECEIVED
DEPARTMENT OF STATE

09 MAR -9 PM 1:16

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 3, 2009

Kunkle

MICHELE MILLS ~~KINKLE~~
3406 61ST TERRACE EAST
ELLENTON, FL 34222

SUBJECT: SEE SHELL FIRST ASSISTING
Ref. Number: W09000010059

We have received your document for SEE SHELL FIRST ASSISTING and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 309A00007338

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: See-Shell First Assisting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

3406 61st Terrace East
Ellenton FL 34222

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corp., New Business
Service - Surgical First Assisting

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Michele Kunkle Pres.
3406 61st Ter. E.
Ellenton, FL 34222

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Michele Mills Kunkle
3406 61st Ter. E.
Ellenton, FL 34222

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michele Kunkle
3406 61st Ter. E.
Ellenton FL 34222

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

Michele M. Kunkle
Signature/Registered Agent

3-7-09
Date

Michele M. Kunkle
Signature/Incorporator

2-26-09
Date

FILED
09 MAR -9 AM 11:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA