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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 APR 20 PM 2:01

PS 4/23/12

COVER LETTER

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

SUBJECT: Specialty Coatings and Repair 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: Jeffrey M. Littlefield
Name (Printed or typed)

1218 2nd St. North
Address

Jacksonville Beach, FL 32250
City, State & Zip

850-322-6066
Daytime Telephone number

littlefieldjeffrey@gmail.com
E-mail address: (to be used for future annual report notification)

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

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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ARTICLE I NAME
The name of the corporation shall be: Specialty Coatings and Repair Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1218 2nd St. North
Jacksonville Beach, FL
32250

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
A for profit business, providing precision interior - exterior painting, waterproofing and substrate repairs in the residential and light-commercial industry.

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jeffrey M. Littlefield-President
Address: 1218 2nd St. North, Jacksonville Beach, FL 32250

Name and Title:
Address:

Name and Title: Donna Fauls Baker-Vice-President
Address: 1218 2nd St. North, Jacksonville Beach, FL 32250

Name and Title:
Address:

Name and Title: Donna Fauls Baker-Treasurer
Address: 1218 2nd St. North, Jacksonville Beach, FL 32250

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box **NOT** acceptable) of the registered agent is:
Name: Jeffrey M. Littlefield
Address: 1218 2nd St. North, Jacksonville Beach, FL 32250

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Name: Jeffrey M. Littlefield
Address: 1218 2nd St. North, Jacksonville Beach, FL 32250

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

Required Signature/Registered Agent — April 19, 2012 Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator — April 19, 2012 Date