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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to I	Filina Officer:	
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Office Use Only



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SECRETARY OF STAIL DIVISION OF CORPERATIONS

or 2/12/13

COVER LETTER

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

SURJECT: Spo	rtin Wood Inc.				
Scholler.	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		•
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	d a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
			-	j	
FROM: A	nthony W. Rauni	(Printed or typed)			
24	l87 Sarno Rd.				
		Address			=
Melbourne, fl 32935		<u> </u>	SEVII		
	City,	State & Zip		FEB	ή.
40	74851218				
tor	ny@sportinwood.ne	elephone number t d for future annual report r	notification)	1 AM 11: 42	TED Y OF STATE ORPARATIONS

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)

ARTICLE I NAM The name of the corporate	tion shall be: Sportin Wood Inc.		FILED. SECRETARY OF STATE DIVISION OF CORPORATIONS
	NCIPAL OFFICE Principal street address		Mailing address 13 different is: AMII: 42
9101 Ellis Rd	# A-6		
West Melbour	ne, Fl 32904		
ARTICLE III PURE The purpose for which the	POSE he corporation is organized is:	re wood and	metal products, refinish or repair.
	·		
		**	1-11-11-1
,			
The number of shares of	RES 100 stock is:		
ARTICLE V INIT	TAL OFFICERS AND/OR DIRECTORS	<u>s</u>	
Name and Title	Anthony W. Raunikar, president	Name and Title	Carl D. Odaffer, νP
Address	2487 Sarno Rd	Address:	2780 collegeviéw dr.
	Melbourne, fl 32935		melbourne, fl 32935
			·
Name and Title:		Name and Title	·
Address		Address:	
Name and Title:		Name and Title	;
Address		Address:	

Name ar	nd Title:	Name and Title:	_
Address	s	Address:	
			_
ARTICLE VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Carl David Odaffer		
Address:	2780 collegeview dr.	SEC 13 P	
	melbourne, fl 32935	CN CON CONTRACT	
ARTICLE VII	INCORPORATOR	FILED. RY OF STATE CORPORATION 1 AM II: 42	
The name and a	ddress of the Incorporator is:	RA.	
Name:	Carl D. Odaffer	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
Address:	2780 Collegeview dr.	- -	
	Melbourne, fl 32935		
	med as registered agent to accept service of proces am familiar with and accept the appointment as re	ess for the above stated corporation at the place designate egistered agent and agree to act in this capacity	1 in
Ca	el D. Ofaller	2-6-13	
	Required Signature/Registered Agent	Date	_
	cument and affirm that the facts stated herein are Department of State constitutes a third degree felo	e true. I am aware that the false information submitted to ony as provided for in s.817.155, F.S.	n a
Car	Required Signature/Incorporator	2-6-13 Date	_
Having been narthis certificate, I I submit this document to the	med as registered agent to accept service of process am familiar with and accept the appointment as re Required Signature/Registered Agent cument and affirm that the facts stated herein are Department of State constitutes a third degree felo	egistered agent and agree to act in this capacity \[\begin{align*} \begin{align*} \leftrightarrow \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	_