

P 140000 81395

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

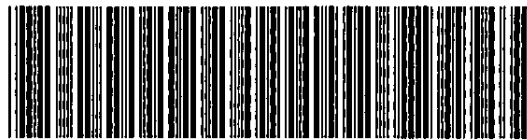
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/25/14--01008--017 **78.75

FILED
14 SEP 25 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 29 2014
S. GILBERT

COVER LETTER

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

SUBJECT: SOLAR LIFE, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: STEVEN J. COBUCCI
Name (Printed or typed)

1132 DON BISHOP RD.
Address

SANTA ROSA BEACH, FLORIDA 32459
City, State & Zip

850-687-0646
Daytime Telephone number

STEVEN COBUCCI@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)

ARTICLE I NAME

The name of the corporation shall be: SOLAR LIFE, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1132 DON BISHOP ROAD
SANTA ROSA BEACH, FL 32459

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO SELL & INSTALL A FULL

- LINE OF SOLAR ENERGY PRODUCTS:
SOLAR PANELS, POOL HEATERS, SOLAR WATER HEATERS
AND SUCH!
- WINDOW FILM, SOLAR SHADES & SOLAR SCREENS.
- RESIDENTIAL, COMMERCIAL & CONDO.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>STEVEN COBUCCI</u>	Name and Title: <u>STEVEN COBUCCI</u>
Address: <u>PRESIDENT</u>	Address: <u>SECRETARY</u>
<u>449 WOODLAND BAYOU DR.</u>	<u>449 WOODLAND BAYOU DR.</u>
<u>SANTA ROSA BEACH, FL 32459</u>	<u>SANTA ROSA BEACH, FL 32459</u>

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: STEVEN CABULLI
 Address: 449 WOODLAND BAYOU DRIVE
SANTA ROSA BEACH, FL 32459

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: STEVEN J. CABULLI
 Address: 449 WOODLAND BAYOU DRIVE
SANTA ROSA BEACH, FL 32459

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 9-22-14
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 9-22-14
Date