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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: SETANTA MACHINERY OF FLORIDA 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 ☐ \$78.75
Filing Fee 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: PATRICK TALLON

Name (Printed or typed)

1636 RIDGEWOOD AVE UNIT A1

Address

MAITLAND, FLORIDA 32751

City, State & Zip

732-341-1773

Daytime Telephone number

TOM@TTSCPA.COM

E-mail address: (to be used for future annual report notification)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: SETANTA MACHINERY OF FLORIDA INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1636 RODGEWOOD AVE, UNIT A1

PO BOX 940985

MAITLAND, FLORIDA 32751

MAITLAND, FLORIDA 32794-0985

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SELL HEAVY MACHINERY

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PATRICK TALLON, PRESIDENT

Name and Title: _____

Address 1636 RIDGEWOOD AVE

Address: _____

UNIT A1

MAITLAND, FL 32751

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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AND
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15 DEC 14 PM 2: 24

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: PATRICK TALLON

Address: 1636 RIDGEWOOD AVE, UNIT A1

MAITLAND, FLORIDA 32751

ARTICLE VII INCORPORATOR

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

Name: THOMAS TOTARO

Address: 1108 HOOPER AVE, SUITE 3

TOMS RIVER, NJ 08753

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: JANUARY 1, 2016. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

<u>Patrick Tallon</u>	<u>12/10/2015</u>
Required Signature/Registered Agent	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.

<u>[Signature]</u>	<u>12/10/2015</u>
Required Signature/Incorporator	Date