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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: American Motor Officer, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: Arthur Pittman

Name (Printed or typed)

23751 Merano Ct., #102

Address

Bonita Springs, FL 34134

City, State & Zip

(716) 308-7256

23751 Merano Ct., #102
Bonita Springs, FL 34134
Telephone number

americanmotorofficer@yahoo.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 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: American Motor Officer, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address
23751 Merano Ct., #102
Bonita Springs, FL 34134

Mailing address, if different is:
PMB 357, ATLANTASSEE, FLORIDA
24600 So Tamiami Trail Ste 212
Bonita Springs, FL 34134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To seek motorcycle safety and a higher understanding utilizing the act of knowledge through education. Police motor officers and civilians will share in the development of techniques and skills that will be developed and passed on by the submission and posting of articles.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

Directors are appointed according to their knowledge and experience

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Arthur Pittman, President
Address: 23751 Merano Ct., #102
Bonita Springs, FL 34134

Name and Title: _____
Address: _____

Name and Title: Jodie L. Jelonek, Vice President
Address: 49850 Becher Dr. West
Macomb, MI 48044

Name and Title: _____
Address: _____

Name and Title: Christian I. Pittman, Director of Marketing
Address: 250 Rainbow Blvd., Apt 308
Niagara Falls, NY 14303

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: Arthur Pittman
Address: 23751 Merano Ct., #102
Bonita Springs, FL 34134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jodie L. Jelonek
Address: 49850 Becher Dr. West
Macomb, MI 48044

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

Arthur Pittman
Required Signature of Registered Agent

8-22-2012
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

Jodie L. Jelonek
Required Signature of Incorporator

02/20/2012
Date