

TRANSMITTAL LETTER

P0000060583

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

SUBJECT:

SHELLY TECH INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300003296123--4

-06/20/00--01006--004

*****70.00 *****70.00

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 of
Status

ADDITIONAL COPY REQUIRED

FROM:

REID ANDRONGA
Name (Printed or typed)

42 NE 15TH TERR
Address

STUART, FL 34994
City, State & Zip

561/334-9721
Daytime telephone number

FILED
2000 JUN 19 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

AR 6/22

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:

SHELLY TECH INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

42 NE 15TH TERR.
STUART, FL 34994

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

AUTO SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

REID ANDRINGA
42 NE 15TH TERR
STUART, FL 34994

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

REID ANDRINGA
42 NE 15TH TERR
STUART, FL 34994

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

REID ANDRINGA
42 NE 15TH TERR
STUART, FL 34994

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

Signature/Registered Agent

Date

5/15/00

Signature/Incorporator

Date

5/15/00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2000 JUN 19 AM 10:52

FILED