

PD2000074393

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 JUL -9 PM 1:39

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

(City, State, Zip)

385-6735

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. INCOM GAS Inc (Corporation Name) (Document #)

2. _____ (Corporation Name) (Document #)

3. _____ (Corporation Name) (Document #)

4. _____ (Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:06

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

300006273613-4
-07/09/02-01003-027
*****78.75 *****78.75

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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ARTICLES OF INCORPORATION
OF
NCOMPAS INC.

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The undersigned, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following articles of incorporation:

ARTICLE ONE

The name of this corporation is NCompas Inc.

ARTICLE TWO

The corporation is to have perpetual existence.

ARTICLE THREE

The corporation may transact any and all lawful business for which corporations may be incorporated under the Florida Business Corporation Act.

ARTICLE FOUR

4.01 The aggregate number of shares which the corporation shall have the authority to issue is 1000, all of which shall be common shares with a par value of \$1.00 per share.

4.02 The minimum amount of paid-in capital with which the corporation shall begin business shall be not less than Five Hundred Dollars (\$500.00).

ARTICLE FIVE

5.01 The street address of the initial corporate office of the corporation is One Main Street, Suite 201, P.O. Box 4085, Tequesta, FL 33469

5.02 The name and address of the initial Resident Agent for this corporation to accept service of process within the State of Florida is Mark J. Nowicki, 14155 U. S. Highway One, Suite 210, Juno Beach, Florida 33408.

ARTICLE SIX

6.01 The name and address of the incorporator of this corporation is Mark J. Nowicki, 14155 U.S. Highway One, Suite 210, Juno Beach, FL 33408.

6.02 Said incorporator is over the age of eighteen (18) years; is sui juris, and is a citizen of the United States.

ARTICLE SEVEN

7.01 One director shall constitute the initial Board of Directors of the corporation, but the Bylaws may provide for such increase or decrease in number thereof as is authorized by law.

7.02 The name(s) and address(es) of the member(s) of the first Board of Directors are:

Name

Address

Fredrick D. Shaffer

One Main Street, Suite 201
P.O. Box 4085
Tequesta, FL 33469

ARTICLE EIGHT

Nothing in these articles of incorporation shall be taken to limit the power of this corporation.

IN WITNESS WHEREOF, the undersigned has made and subscribed these articles of incorporation this 22nd day of JUNE, 2002.

By: _____

Incorporator

STATE OF FLORIDA
COUNTY OF PALM BEACH

Before me, the undersigned authority, personally appeared MARK J. NOWICKI, ESQ., known to me to be the person described in who is personally known to me or who produced a driver license as identification and who subscribed the above and foregoing Articles of Incorporation; and who acknowledged that he made and subscribed the same for the purposes and uses set forth therein.

IN WITNESS WHEREOF, I have set my hand and affixed my official seal in the above-named County and State this 28 day of June, 2002.

Dianne M Good
Notary Public

My Commission expires:



Dianne M. Good
MY COMMISSION # CC900441 EXPIRES
February 24, 2004
BONDED THRU TROY FAIR INSURANCE, INC

STATE OF FLORIDA
DEPARTMENT OF STATE

Certificate Designating Place of Business or Domicile for the Service of Process Within This State, Naming Agent Upon Whom Process May be Served on Behalf of NCompas Inc.

The following is submitted, in compliance with Chapter 607.0202 and 607.0501(3), Florida Statutes:

NCompas Inc., a corporation organized under the laws of the State of Florida, with its principal office at One Main Street, Suite 201, P.O. Box 4085, Tequesta, FL 33469, has named Mark J. Nowicki, 14155 U. S. Highway One, Suite 210, Juno Beach, Florida, its agent to accept service of process within this State.

OFFICERS

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>
Fredrick D. Shaffer	President	One Main Street, Suite 201 P.O. Box 4085 Tequesta, FL 33469

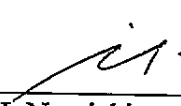
DIRECTORS

<u>NAME</u>	<u>ADDRESS</u>
Fredrick D. Shaffer	One Main Street, Suite 201 P.O. Box 4085 Tequesta, FL 33469

By: 
Mark J. Nowicki, Incorporator

ACCEPTANCE:

I agree to act as Resident Agent to accept Service of Process; to keep the office open during prescribed hours; to post my name (and any other officers of said corporation authorized to accept service of process at the Florida designated address) in some conspicuous place in office as required by law.



Mark J. Nowicki
Registered Agent

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