

P03000003944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

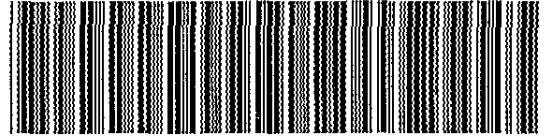
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/18/03--01038--001 **70.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 JAN - 8 AM 9:11

REG. NO. 101140

TRANSMITTAL LETTER

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

SUBJECT: SOK - CLIP, 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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: JACK MENTKOW
Name (Printed or typed)

1875 TULIP LN
Address

WELLINGTON, FL 33414
City, State & Zip

561-793-9773
Daytime Telephone number

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:

SOK-CLIP, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1875 TULIP LANE,
WELLINGTON, FL 33414

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MANUFACTURE OF PRODUCT

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JACK MENTKOW, PRESIDENT, 1875 TULIP LN, WELLINGTON, FL 33414
LISA MENTKOW, V.P., SECRETARY, 1875 TULIP LN, WELLINGTON, FL 33414

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

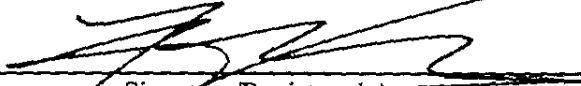
JACK MENTKOW
1875 TULIP LN
WELLINGTON, FL 33414

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JACK MENTKOW
1875 TULIP LN
WELLINGTON, FL 33414

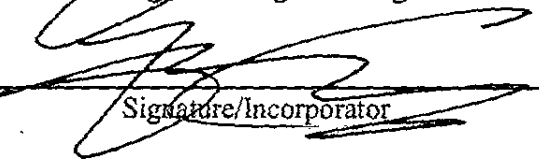
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

1/4/03

Date



Signature/Incorporator

1/4/03

Date

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TALLAHASSEE, FLORIDA
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