

P03000004536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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(Business Entity Name)

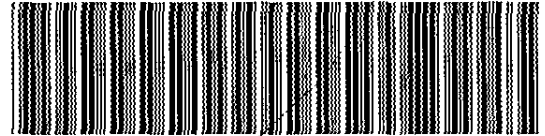
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FILED
03 JAN -9 AM 10:47
SEC. 1
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VI
1-4-03

TRANSMITTAL LETTER

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

SUBJECT: C.M. ROBERTS & ASSOCIATES, 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: C. MICHAEL ROBERTS
Name (Printed or typed)

9 SPINNAKER CIRCLE
Address

SOUTH DAYTONA, FL 32119
City, State & Zip

386-322-7911
Daytime Telephone number

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

Mr. Roberts GAVE
AUTHORIZATION BY PHONE TO
CORRECT IV
DATE 1-13-03
DOC. EXAM 12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 JAN -9 PM 5:00

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: C.M. ROBERTS & ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 11574
DAYTONA BEACH, FL 32120-11574

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s): C. MICHAEL ROBERTS, PRESIDENT
9 SPINNAKER CIRCLE
SOUTH DAYTONA, FL 32119

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: C. MICHAEL ROBERTS
9 SPINNAKER CIRCLE
SOUTH DAYTONA, FL 32119

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: C. MICHAEL ROBERTS
9 SPINNAKER CIRCLE
SOUTH DAYTONA, FL 32119

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

C. Michael Roberts
Signature/Registered Agent

01/06/03
Date

C. Michael Roberts
Signature/Incorporator

01/06/03
Date