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(Requestor's Name)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 JAN 31 PM 1:27

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TRANSMITTAL LETTER

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

SUBJECT: TEAMAKER, 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Gail H. Naimo
Name (Printed or typed)

1700 Walden Pond Drive
Address

FORT PIERCE FLORIDA 34945
City, State & Zip

772-370-7957
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:

TEAMAKER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1700 Walden Pond Dr
Ft. Pierce, FL 34945

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

Gail H. Naimo
1700 Walden Pond Drive
Ft. Pierce, Florida 34945

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gail H. Naimo
1700 Walden Pond Drive
Ft. Pierce, FL 34945

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

Gail H. Naimo
Signature/Registered Agent

1/27/03
Date

Gail H. Naimo
Signature/Incorporator

1/27/03
Date

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TALLAHASSEE, FLORIDA