

P03000019097

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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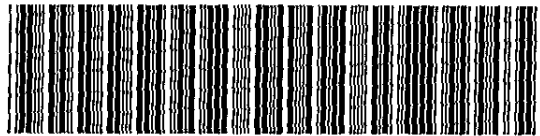
Timothy GAVE

AUTHORIZATION BY PHONE TO

CORRECT Act. IV

DATE 2-18-03

DOC. EXAM. [Signature]



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03 FEB 13 PM 12:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02/13/03--01038--004 \*\*78.75

2-18-03  
[Signature]

## TRANSMITTAL LETTER

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

SUBJECT: SKORPION ENTERPRISE 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: TIMOTHY HICKS  
Name (Printed or typed)

18854 Big Cypress Dr.  
Address

Jupiter, Fl. 33458  
City, State & Zip

(561) 718-7650  
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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE I NAME

The name of the corporation shall be:

SKORPION ENTERPRISE INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

18854 Big Cypress Dr.

Jupiter Fl. 33458

(mobil)

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

COMPUTER CONSULTANT.

## ARTICLE IV SHARES

The number of shares of stock is:

FIVE HUNDRED

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

TIMOTHY HICKS 50% -President.-

18854 Big Cypress Dr.

Jupiter, Fl. 33458

CHRISTINE HICKS -Vice-President-  
50%

## ARTICLE VI REGISTERED AGENT

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

TIMOTHY HICKS

18854 Big Cypress Dr.

Jupiter, Fl. 33458

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

TIMOTHY HICKS

18854 Big Cypress Dr.

Jupiter Fl. 33458

\*\*\*\*\*  
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

02-06-03

Date

  
Signature/Incorporator

02-06-03

Date