

PO3D00056578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

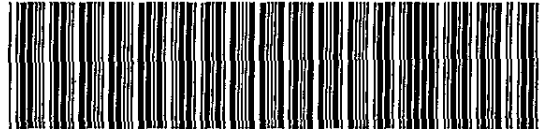
(Document Number)

Certified Copies ☒

Certificates of Status ☒

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03 MAY 14 PM 2:03

STATEMENT OF SIA
TALLAHASSEE, FLORIDA

5-22-03
[Signature]

TRANSMITTAL LETTER

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

SUBJECT: Downtime Products, 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
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: Thomas R Ellis
Name (Printed or typed)

815 W. Florence Av.
Address

DeLand, FL 32720
City, State & Zip

386 801-6590 386 734-2587
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:

Downtime Products, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

815 W. Florence Av, DeLand FL 32720

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
retail sales

ARTICLE IV SHARES

The number of shares of stock is:
20

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Kimberley A. Ellis, President

Thomas R. Ellis, Vice President, Secretary and Treasurer

ARTICLE VI REGISTERED AGENT

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

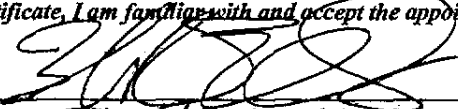
Thomas R. Ellis 815 W. Florence Av. DeLand FL 32720


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

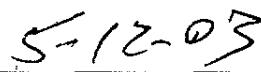
Thomas R. Ellis 815 W. Florence Av DeLand FL 32720


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


Signature/Incorporator



Date


Date

FILED
03 MAY 14 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA