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DATE 03/04/03 BY 1043

TRANSMITTAL LETTER

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

SUBJECT: GLIDDEN INVESTIGATIONS 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: MARK G. GLIDDEN
Name (Printed or typed)

419 93rd AVE N #1
Address

ST. PETERSBURG, FL 33702
City, State & Zip

(727) 577-5394
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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

GLIDDEN INVESTIGATIONS INC

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

419 93 AVENUE #1 ST. PETERSBURG, FL 33702

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROVIDE PRIVATE INVESTIGATION SVCS FOR CLIENTS

ARTICLE IV SHARES

The number of shares of stock is:

ONE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

N/A

ARTICLE VI REGISTERED AGENT

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

MARK G. GLIDDEN 419 93 AVENUE #1
ST. PETERSBURG, FL.
33702

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARK G. GLIDDEN 419 93 AVENUE #1
ST. PETERSBURG, FL
33702

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

9/2/03

Date



Signature/Incorporator

9/2/03

Date