

P03000102152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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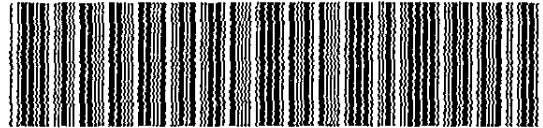
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/27/03--01023--010 **78.75

FILED
03 SEP 17 AM 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M03-25075

08/9/18

TRANSMITTAL LETTER

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

SUBJECT: GRIPPERS, 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: SAMMY DEGALICIA
Name (Printed or typed)

P.O. Box 50295
Address

JACKSONVILLE BEACH, FL 32240
City, State & Zip

904. 887. 5034
Daytime Telephone number

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



RECEIVED

03 SEP 17 PM 2:48

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 3, 2003

SAMMY DEGALICIA
P.O. BOX 50295
JACKSONVILLE BEACH, FL 32240

SUBJECT: GRIPPERS, INC.
Ref. Number: W03000025075

We have received your document for GRIPPERS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6972.

Doris Brown
Document Specialist
New Filings Section

Letter Number: 803A00049163

ARTICLES OF INCORPORATION
OF
GRIPPERS WAX, INC.

FILED
03 SEP 17 AM 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s) hereby subscribe(s) these articles of incorporation to form a corporation under the laws of the state of Florida.

ARTICLE I
NAME

The name of the corporation shall be: Grippers wax, Inc.

ARTICLE II
PRINCIPAL OFFICE

The street address (in the state of Florida) of the initial principal office of the corporation is: 98 South Penman Road, Jacksonville Beach, Florida 32250.

The mailing address of the corporation is: P.O. Box 50295, Jacksonville Beach, Florida 32240

ARTICLE III
DURATION

The duration of this corporation shall be perpetual. Corporate existence shall begin at the date of signing and acknowledgment of these articles of incorporation provided that all of the requirement of the laws are met.

ARTICLE IV
PURPOSE

This corporation is organized for the purpose of transacting and engaging in any and all lawful business for which incorporated under the Florida General Corporation Act.

ARTICLE V
CAPITAL STOCK

The aggregate number of shares which this corporation is authorized is 500 shares of common stock (designed as "common stock") having a par value of \$1.00 per share.

**ARTICLE VI
INCORPORATORS**

The names and addresses of the incorporators signing these articles of incorporation is:

Name of incorporator:

Address:

Sammy G. deGalia

2621 Trollie Lane Apt. 8
Jacksonville, Florida 32211

Mark Vollenweider

1368 Plantation Oaks Drive South
Jacksonville Beach, Florida 32250

**ARTICLE VII
CORPORATE POWERS**

This corporation shall have all the corporate power enumerated in the Florida General Corporation Act.

**ARTICLE VIII
AMENDMENT**

This corporation reserves the right to amend or repeal any provision contained in these articles of incorporation, or and amendment hereto, and any right conferred upon the stockholder is subject to this reservation.

ARTICLE IX
SPECIAL PROVISION

The following shall constitute the officers of the corporation.

Name/Position:	Address:
Sammy G. deGalicia	2621 Trollie Lane Apt. 8
President	Jacksonville, Florida 32211

Mark H. Vollenweider	1368 Plantation Oaks Drive South
Secretary/Treasurer	Jacksonville Beach, Florida 32250

To hold such office until the organizational meeting of the stockholder is held for the purpose of electing officers, adopting bylaws and transacting such other business as may come before the meeting. The officers above named are authorized to sign and issue appropriate certificates evidencing the share of stock of this corporation. The existence of more than one (1) shareholder shall not be required in order to hold the said organizational meeting.

SIGNED AND EXECUTED THIS THE 20 DAY OF August 2003
AT JACKSONVILLE, DUVAL COUNTY, FLORIDA.


AS INCORPORATOR

ACKNOWLEDGEMENT

STATE OF FLORIDA
COUNTY OF DUVAL

The foregoing was acknowledged before me this the 20 day of August 2003
2003 by Mark Vollenweider.


Notary Public
State of Florida



V453548642500
Aurora Fontanez
MY COMMISSION # DD178902 EXPIRES
January 21, 2007
BONDED THRU TROY FAIR INSURANCE, INC

My commission expires _____

CERTIFICATE DESIGNATING REGISTERED OFFICE AND
REGISTERED AGENT FOR THE SERVICE OF PROCESS WITHIN
FLORIDA

In compliance with FLA, STAT, 48, 091, 607, 034, the following is submitted:
Grippers wax, Inc.

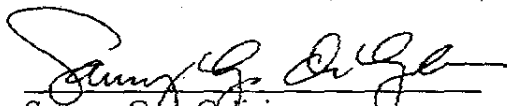
Desiring to organize or qualify under the laws of the State of Florida hereby designate
Sammy G. deGalicia as registered agent to accept service of process within the state of
Florida and the address of its registered office shall be:

98 South Penman Road
Jacksonville Beach, FL 32250


Sammy G. deGalicia

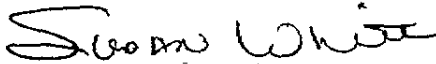
9-15-03
Date

Having been named to accept service of process for the above stated corporation at the
place designated in this certificate, I hereby agree to act in this capacity, and further agree
to comply with the provision of all statutes relative to the proper and complete
performance of my duties.


Sammy G. deGalicia

9-15-03
Date

FL DC D242787671820



Notary Public
State of Florida



Susan White
MY COMMISSION # DD070540 EXPIRES
April 24, 2005
BONDED THRU TROY FARM INSURANCE, INC.

FILED
03 SEP 17 AM 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

My commission expires on 4/24/05