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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT:	MATT O'BRIEN'S	PUNCH-OUT , I	سد.	
	(PROPOSED CORPORA	ATE NAME - MUST INCL	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	a check for:	
□ \$70.00	\$ 78.75	\$78.75	D \$87.50	
Filing Fee	··· • • • · · · · · · · · · · · · · · ·	Filing Fee	Filing Fee,	
1.11116.400	& Certificate of Status	& Certified Copy		
		or consists copy	& Certificate of	
			Status	
		ADDITIONAL CO		
FROM:	STEVEN	COLON		
PROM.	Name (Printed or typed)			
413 BAYSIDE LAWE				
•	Address			
	NOKOMIS	FL 3427	5	
•	City	, State & Zip		
		_		
	941 - 2	84 - 7164		
Dautine 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:

Matt O'Brien's Punch-Out, Inc.

Article II Principal Office

The principal place of business/mailing address is:

2214 W. Lockwood Lake Cir.

Sarasota, FL 34234

Article III Purpose

The purpose for which the corporation is organized is the exercise of construction.

Article IV Shares

The number of shares of stock is 200

Initial Officer/Directors Article V

Mr. Matthew M. O'Brien

2214 W. Lockwood Lake Cir.

Sarasota, FL 34234

Article VI Registered Agent

Steven Colon

413 Bayside Lane

Nokomis, FL 34275

Article VII Incorporator

Steven Colon

413 Bayside Lane

Nokomis, FL 34275

Article VIII Effective Date

April 1, 2004

Having been named as a 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 a registered agent and agree to act in this capacity.

Signature/Registered Agent

Signature/Incorporator

3/30/04 Date

EFFECTIVE DATE