P04000093613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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04 JUN 17 AM 9:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6/18/04

# TRANSMITTAL LETTER

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

**SUBJECT:** General Pools of Stuart Commercial Divisi In
(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: Michael A. Hoffa
Name (Printed or typed)

16458 SW Travers St
Address

Palm City, FL 34990
City, State & Zip

772-288-1427
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:

General Pools of Stuart, Commercial Division, Inc

***ARTICLE II PRINCIPAL OFFICE***

The principal place of business/mailing address is:

P.O. Box 994
Palm city, FL 34991

***ARTICLE III PURPOSE***

The purpose for which the corporation is organized is:

Any legal Business

***ARTICLE IV SHARES***

The number of shares of stock is: 100

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TALLAHASSEE, FLORIDA

***ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS***

List name(s), address(es) and specific title(s):

michael A Noffa - President
6458 SW Travers st.
Palm City, Fl. 34990

Tamara L Noffa
Secretary
6458 SW Travers st
Palm city, Fl
34990

***ARTICLE VI REGISTERED AGENT***

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

michael A Noffa
6458 SW Travers st
Palm city, Fl 34990

***ARTICLE VII INCORPORATOR***

The **name and address** of the Incorporator is:

michael a Noffa
6458 SW Travers st
Palm city, Fl 34990

**********

***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***

Michael A Noffa
Signature/Registered Agent

6-16-04
Date

Michael A Noffa
Signature/Incorporator

6-16-04
Date