

P04000168536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

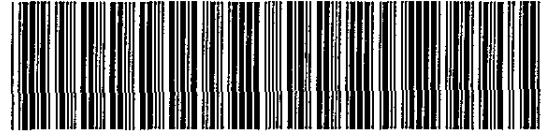
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office/Use Only



800042734078

11/22/04--01027--009 **78.75

FILED

2004 DEC 16 A 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/16/✓

TRANSMITTAL LETTER

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

SUBJECT: SDS, 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: Shirley Jean Schratter
Name (Printed or typed)

28183 Old Trilby Rd.
Address

Brooksville, FL 34602
City, State & Zip

352-754-9088
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

December 1, 2004

SHIRLEY JEAN SCHRATTER
28183 OLD TRILBY RD.
BROOKSVILLE, FL 34602

SUBJECT: S D S INC
Ref. Number: W04000043808

We have received your document for S D S INC. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

The document number of the name conflict is P04000137561.

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) 245-6934.

Loria Poole
Document Specialist
New Filings Section

Letter Number: 404A00067432

RECEIVED
04 DEC 15 PM 7:05
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
AND ALIENS OF FLORIDA

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:

Schratter Design Service, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*28183 Old Trilby Rd.
Brooksville, FL 34602*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Architectural design

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Shirley Jean Schratter
28183 Old Trilby Rd.
Brooksville, FL 34602*

ARTICLE VI REGISTERED AGENT

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

*Shirley Jean Schratter
28183 Old Trilby Rd. Brooksville, FL 34602*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Shirley Jean Schratter
28183 Old Trilby Rd. Brooksville, FL 34602*

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

Shirley J Schratter

Signature/Registered Agent

11/18/04

Date

Shirley J Schratter

Signature/Incorporator

11/18/04

Date

FILED
2004 DEC 16 A 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA